

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base																																																												
Current Rider Number	Page Number in 2014-2015 GAA	Proposed Rider Language																																																														
1	II-52	<p>Performance Measure Targets. The following is a listing of the key performance target levels for the Department of State Health Services. It is the intent of the Legislature that appropriations made by this Act be utilized in the most efficient and effective manner possible to achieve the intended mission of the Department of State Health Services. In order to achieve the objectives and service standards established by this Act, the Department of State Health Services shall make every effort to attain the following designated key performance target levels associated with each item of appropriation.</p> <table border="0"> <thead> <tr> <th></th> <th style="text-align: center;"><u>2014</u></th> <th style="text-align: center;"><u>2015</u></th> </tr> </thead> <tbody> <tr> <td colspan="3">A. Goal: PREPAREDNESS AND PREVENTION</td> </tr> <tr> <td colspan="3">Outcome (Results/Impact):</td> </tr> <tr> <td colspan="3">Percent of Staff Reached during Public Health Disaster Response Drills</td> </tr> <tr> <td></td> <td style="text-align: center;">80%</td> <td style="text-align: center;">80%</td> </tr> <tr> <td colspan="3">Vaccination Coverage Levels among Children Aged 19 to 35 Months</td> </tr> <tr> <td></td> <td style="text-align: center;">70.2%</td> <td style="text-align: center;">70.4%</td> </tr> <tr> <td colspan="3">Incidence Rate of TB Among Texas Residents</td> </tr> <tr> <td></td> <td style="text-align: center;">4.4</td> <td style="text-align: center;">4.2</td> </tr> <tr> <td colspan="3">A.1.2. Strategy: REGISTRIES, INFO, & VITAL RECORDS</td> </tr> <tr> <td colspan="3">Efficiencies:</td> </tr> <tr> <td colspan="3">Average Number of Days to Certify or Verify Vital Statistics Records</td> </tr> <tr> <td></td> <td style="text-align: center;">11.1</td> <td style="text-align: center;">11.1</td> </tr> <tr> <td colspan="3">A.2.1. Strategy: IMMUNIZE CHILDREN & ADULTS IN TEXAS</td> </tr> <tr> <td colspan="3">Output (Volume):</td> </tr> <tr> <td colspan="3">Number of Vaccine Doses Administered to Children</td> </tr> <tr> <td></td> <td style="text-align: center;">14,493,923</td> <td style="text-align: center;">14,725,692</td> </tr> <tr> <td colspan="3">Explanatory:</td> </tr> <tr> <td colspan="3">Dollar Value (in Millions) of Vaccine Provided by the Federal Government</td> </tr> <tr> <td></td> <td style="text-align: center;">356</td> <td style="text-align: center;">363</td> </tr> </tbody> </table>				<u>2014</u>	<u>2015</u>	A. Goal: PREPAREDNESS AND PREVENTION			Outcome (Results/Impact):			Percent of Staff Reached during Public Health Disaster Response Drills				80%	80%	Vaccination Coverage Levels among Children Aged 19 to 35 Months				70.2%	70.4%	Incidence Rate of TB Among Texas Residents				4.4	4.2	A.1.2. Strategy: REGISTRIES, INFO, & VITAL RECORDS			Efficiencies:			Average Number of Days to Certify or Verify Vital Statistics Records				11.1	11.1	A.2.1. Strategy: IMMUNIZE CHILDREN & ADULTS IN TEXAS			Output (Volume):			Number of Vaccine Doses Administered to Children				14,493,923	14,725,692	Explanatory:			Dollar Value (in Millions) of Vaccine Provided by the Federal Government				356	363
	<u>2014</u>	<u>2015</u>																																																														
A. Goal: PREPAREDNESS AND PREVENTION																																																																
Outcome (Results/Impact):																																																																
Percent of Staff Reached during Public Health Disaster Response Drills																																																																
	80%	80%																																																														
Vaccination Coverage Levels among Children Aged 19 to 35 Months																																																																
	70.2%	70.4%																																																														
Incidence Rate of TB Among Texas Residents																																																																
	4.4	4.2																																																														
A.1.2. Strategy: REGISTRIES, INFO, & VITAL RECORDS																																																																
Efficiencies:																																																																
Average Number of Days to Certify or Verify Vital Statistics Records																																																																
	11.1	11.1																																																														
A.2.1. Strategy: IMMUNIZE CHILDREN & ADULTS IN TEXAS																																																																
Output (Volume):																																																																
Number of Vaccine Doses Administered to Children																																																																
	14,493,923	14,725,692																																																														
Explanatory:																																																																
Dollar Value (in Millions) of Vaccine Provided by the Federal Government																																																																
	356	363																																																														

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
<p>A.2.2. Strategy: HIV/STD PREVENTION Output (Volume): Number of Persons Served by the HIV Medication Program 19,173 19,070</p> <p>A.2.3. Strategy: INFECTIOUS DISEASE PREV/EPI/SURV Output (Volume): Number of Communicable Disease Investigations Conducted 100,000 100,000</p> <p>A.3.1. Strategy: CHRONIC DISEASE PREVENTION Output (Volume): Number of Diabetes related Prevention Activities 238,000 238,000</p> <p>A.3.2. Strategy: ABSTINENCE EDUCATION Output (Volume): Number of Persons Served in Abstinence Education Programs 48,000 48,000</p> <p>A.3.3. Strategy: KIDNEY HEALTH CARE Output (Volume): Number of Kidney Health Clients Provided Services 19,485 17,940</p> <p>A.3.4. Strategy: CHILDREN WITH SPECIAL NEEDS Output (Volume): Average Monthly Caseload of Children with Special Health Care Needs (CSHCN) Clients Receiving Health Care Benefits 1,203 1,173</p> <p>B. Goal: COMMUNITY HEALTH SERVICES Outcome (Results/Impact): Percentage of Eligible WIC Population Served 69% 69% Number of Infant Deaths Per Thousand Live Births (Infant Mortality Rate) 5.7 5.7 Percentage of Low Birth Weight Births 8.6% 8.2% Number of Pregnant Females Age 13-19 Per Thousand (Adolescent Pregnancy Rate) 45 45 Percent of Adults Receiving Community Mental Health</p>				

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
		Services Who Were Admitted to a Level of Care (Service Package) Following Assessment 95% 95% Percent of Adults Receiving Community Mental Health Services Whose Functional Level Stabilized or Improved 83% 83% Percent of Children Receiving Community Mental Health Services Who Were Admitted to a Level of Care (Service Package) Following Assessment 95% 95% Percent of Children Receiving Community Mental Health Services Whose Functional Level Stabilized or Improved 82% 82% Percent of Persons Receiving Crisis Services Who Avoid Psychiatric Hospitalization within 30 Days 89% 89% Percent of Adults Who Complete Treatment Programs and Report No Past Month Substance Use at Follow up 87% 87% Percent of Youth Who Complete Treatment Programs and Report No Past Month Substance Use at Follow up 84% 84% Prevalence of Tobacco Use among Middle & High School Youth in Target Areas of Texas 22% 22%		
		B.1.1. Strategy: WIC/FARMER'S MARKET NUTRITION SVCS Output (Volume): Number of WIC Participants Provided Nutritious Food Supplements Per Month 958,644 958,644 Explanatory: Incidence (Percent) of Low Birth Weight Babies Born to Women, Infants and Children (WIC) Nutrition Program Mothers 8.6% 8.6%		
		B.1.2. Strategy: WOMEN & CHILDREN'S HEALTH SERVICES Output (Volume): Number of Infants <1 and Children Age 1-21 Years Provided Dental and Child Health Services by the Maternal and Child Health Program 41,733 41,733		

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
<p>Number of Women over 21 Provided Services by the Maternal and Child Health Program (Title V) 15,322 15,322</p> <p>B.1.3. Strategy: FAMILY PLANNING SERVICES</p> <p>Output (Volume):</p> <p>Number of Adults and Adolescents Receiving Family Planning Services 65,000 65,000</p> <p>B.1.4. Strategy: COMMUNITY PRIMARY CARE SERVICES</p> <p>Output (Volume):</p> <p>Number of Primary Health Care Eligible Patients Provided Access to Primary Care Services 253,958 250,334</p> <p>B.2.1. Strategy: MENTAL HEALTH SVCS ADULTS</p> <p>Output (Volume):</p> <p>Average Monthly Number of Adults Receiving Community Mental Health Services 57,588 56,634</p> <p>Average Monthly Number of Persons Receiving Community Mental Health New Generation Medications 21,000 21,000</p> <p>Efficiencies:</p> <p>Average Monthly Cost Per Adult Receiving Community Mental Health Services 370 370</p> <p>Average Monthly Cost of New Generation Medications Per Person Receiving Community Mental Health New Generation Medications 140 140</p> <p>B.2.2. Strategy: MENTAL HEALTH SVCS CHILDREN</p> <p>Output (Volume):</p> <p>Average Monthly Number of Children Receiving Community Mental Health Services 12,403 12,221</p> <p>Explanatory:</p> <p>Number of Children and Adolescents Served at the End of the Year Community Mental Health Services 19,330 19,330</p> <p>B.2.3. Strategy: COMMUNITY MENTAL HEALTH CRISIS SVCS</p> <p>Output (Volume):</p>				

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
		Number of Persons Receiving Crisis Residential Services Per Year	21,647	21,647
		Number of Persons Receiving Crisis Outpatient Services Per Year	59,870	59,675
		Efficiencies:		
		Average Amount of GR Spent Per Person for Crisis Residential Services	2,500	2,500
		Average Amount of GR Spent Per Person for Crisis Outpatient Services	800	800
		B.2.4. Strategy: NORTHSTAR BEHAV HLTH WAIVER		
		Output (Volume):		
		Number of Persons Served by NorthSTAR Behavioral Health Services Per Year	60,766	60,766
		B.2.5. Strategy: SUBSTANCE ABUSE PREV/INTERV/TREAT		
		Output (Volume):		
		Average Monthly Number of Adults Served in Substance Abuse Prevention Programs	39,000	39,000
		Average Monthly Number of Youth Served in Substance Abuse Prevention Programs	153,000	153,000
		Average Monthly Number of Adults Served in Substance Abuse Intervention Programs	12,578	12,578
		Average Monthly Number of Youth Served in Substance Abuse Intervention Programs	4,467	4,467
		Average Monthly Number of Adults Served in Treatment Programs for Substance Abuse	7,597	7,597
		Average Monthly Number of Youth Served in Treatment Programs for Substance Abuse	1,254	1,254
		B.2.6. Strategy: REDUCE USE OF TOBACCO PRODUCTS		
		Output (Volume):		
		Number of Texas Communities Implementing Comprehensive Tobacco Prevention Programs	6	6

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
<p>B.3.1. Strategy: EMS AND TRAUMA CARE SYSTEMS</p> <p>Output (Volume): Number of Emergency Health Care Providers (EMS Firms, Hospitals, RACS) Assisted through EMS/Trauma System Funding Programs _____ 2,587 _____ 2,587</p> <p>Explanatory: Number of Trauma Facilities _____ 272 _____ 272 Number of Stroke Facilities _____ 92 _____ 92</p> <hr/> <p>C. Goal: HOSPITAL FACILITIES AND SERVICES</p> <p>Outcome (Results/Impact): Percent of Patients Receiving State Mental Health Facility Services Whose Functional Level Stabilized or Improved _____ 95% _____ 95%</p> <p>C.1.1. Strategy: TX CENTER FOR INFECTIOUS DISEASE</p> <p>Output (Volume): Number of Inpatient Days, Texas Center for Infectious Disease _____ 14,600 _____ 14,600</p> <p>C.1.2. Strategy: SOUTH TEXAS HEALTH CARE SYSTEM</p> <p>Output (Volume): Number of Outpatient Visits, South Texas Health Care System _____ 37,593 _____ 37,404</p> <p>C.1.3. Strategy: MENTAL HEALTH STATE HOSPITALS</p> <p>Output (Volume): Average Daily Census of State Mental Health Facilities _____ 2,376 _____ 2,376 Average Monthly Number of State Mental Health Facility Consumers Receiving New Generation Medication Services _____ 2,530 _____ 2,530</p> <p>Efficiencies: Average Daily Facility Cost Per Occupied State Mental Health Facility Bed _____ 466 _____ 466</p>				

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
<p>Average Monthly Cost of New Generation Medications Per Patient Day For State Mental Health Facility Consumer Receiving New Generation Medication Services _____ 435 _____ 435</p> <p>C.2.1. Strategy: MENTAL HEALTH COMMUNITY HOSPITALS Output (Volume): Average Daily Number of Occupied Mental Health Community Hospital Beds _____ 316 _____ 316</p> <p>Efficiencies: Average Daily Cost Per Occupied Mental Health Community Hospital Bed _____ 483 _____ 483</p> <p>D. Goal: CONSUMER PROTECTION SERVICES Outcome (Results/Impact): Percentage of Licenses Issued within Regulatory Timeframe _____ 98.7% _____ 98.7%</p> <p>D.1.1. Strategy: FOOD (MEAT) AND DRUG SAFETY Efficiencies: Average Cost Per Surveillance Activity—Food/Meat and Drug Safety _____ 295 _____ 295</p> <p>D.1.2. Strategy: ENVIRONMENTAL HEALTH Efficiencies: Average Cost Per Surveillance Activity— Environmental Health _____ 175 _____ 175</p> <p>D.1.3. Strategy: RADIATION CONTROL Efficiencies: Average Cost Per Surveillance Activity—Radiation Control _____ 300 _____ 300</p> <p>D.1.4. Strategy: HEALTH CARE PROFESSIONALS Output (Volume):</p>				

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base																																																																																																																			
<table border="0" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Number of Health Care Professionals and Licensed Chemical Dependency Counselors Licensed, Permitted, Certified, Registered, or Documented</td> <td style="width: 10%; text-align: right;">92,000</td> <td style="width: 10%; text-align: right;">92,000</td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> </tr> <tr> <td colspan="5"> </td> </tr> <tr> <td colspan="5">G. Goal: OFFICE VIOLENT SEX OFFENDER MGMT</td> </tr> <tr> <td colspan="5">G.1.1. Strategy: OFFICE VIOLENT SEX OFFENDER MGMT</td> </tr> <tr> <td colspan="5">Output (Volume):</td> </tr> <tr> <td>Number of Sex Offenders Provided Treatment and Supervision</td> <td style="text-align: right;">221</td> <td style="text-align: right;">253</td> <td></td> <td></td> </tr> <tr> <td colspan="5">Efficiencies:</td> </tr> <tr> <td>Average Cost Per Sex Offender for Treatment and Supervision</td> <td style="text-align: right;">27,120</td> <td style="text-align: right;">27,120</td> <td></td> <td></td> </tr> <tr> <td colspan="5">Explanatory:</td> </tr> <tr> <td>Number of New Civil Commitments</td> <td style="text-align: right;">50</td> <td style="text-align: right;">50</td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td style="text-align: center;"><u>2016</u></td> <td style="text-align: center;"><u>2017</u></td> </tr> <tr> <td colspan="5"> </td> </tr> <tr> <td colspan="5"><u>A. Goal: PREPAREDNESS AND PREVENTION</u></td> </tr> <tr> <td colspan="5"><u>Outcome (Results/Impact):</u></td> </tr> <tr> <td><u>Percent of Staff Reached during Public Health Disaster Response Drills</u></td> <td style="text-align: right;">80%</td> <td style="text-align: right;">80%</td> <td></td> <td></td> </tr> <tr> <td><u>Vaccination Coverage Levels among Children Aged 19 to 35 Months</u></td> <td style="text-align: right;">70.4%</td> <td style="text-align: right;">70.4%</td> <td></td> <td></td> </tr> <tr> <td><u>Incidence Rate of TB Among Texas Residents</u></td> <td style="text-align: right;">4.4</td> <td style="text-align: right;">4.4</td> <td></td> <td></td> </tr> <tr> <td><u>Prevalence of Tobacco Use among Middle & High School Youth Target Areas</u></td> <td style="text-align: right;">22%</td> <td style="text-align: right;">22%</td> <td></td> <td></td> </tr> <tr> <td><u>Prevalence of Smoking among Adult Texans</u></td> <td style="text-align: right;">18.6%</td> <td style="text-align: right;">18.6%</td> <td></td> <td></td> </tr> <tr> <td colspan="5"> </td> </tr> <tr> <td colspan="5"><u>A.1.2. Strategy: HEALTH DATA AND ANALYSIS</u></td> </tr> <tr> <td colspan="5"><u>Efficiencies:</u></td> </tr> <tr> <td><u>Average Number of Days to Certify or Verify Vital Statistics Records</u></td> <td style="text-align: right;">11.1</td> <td style="text-align: right;">11.1</td> <td></td> <td></td> </tr> </table>					Number of Health Care Professionals and Licensed Chemical Dependency Counselors Licensed, Permitted, Certified, Registered, or Documented	92,000	92,000			 					G. Goal: OFFICE VIOLENT SEX OFFENDER MGMT					G.1.1. Strategy: OFFICE VIOLENT SEX OFFENDER MGMT					Output (Volume):					Number of Sex Offenders Provided Treatment and Supervision	221	253			Efficiencies:					Average Cost Per Sex Offender for Treatment and Supervision	27,120	27,120			Explanatory:					Number of New Civil Commitments	50	50						<u>2016</u>	<u>2017</u>	 					<u>A. Goal: PREPAREDNESS AND PREVENTION</u>					<u>Outcome (Results/Impact):</u>					<u>Percent of Staff Reached during Public Health Disaster Response Drills</u>	80%	80%			<u>Vaccination Coverage Levels among Children Aged 19 to 35 Months</u>	70.4%	70.4%			<u>Incidence Rate of TB Among Texas Residents</u>	4.4	4.4			<u>Prevalence of Tobacco Use among Middle & High School Youth Target Areas</u>	22%	22%			<u>Prevalence of Smoking among Adult Texans</u>	18.6%	18.6%			 					<u>A.1.2. Strategy: HEALTH DATA AND ANALYSIS</u>					<u>Efficiencies:</u>					<u>Average Number of Days to Certify or Verify Vital Statistics Records</u>	11.1	11.1		
Number of Health Care Professionals and Licensed Chemical Dependency Counselors Licensed, Permitted, Certified, Registered, or Documented	92,000	92,000																																																																																																																					
G. Goal: OFFICE VIOLENT SEX OFFENDER MGMT																																																																																																																							
G.1.1. Strategy: OFFICE VIOLENT SEX OFFENDER MGMT																																																																																																																							
Output (Volume):																																																																																																																							
Number of Sex Offenders Provided Treatment and Supervision	221	253																																																																																																																					
Efficiencies:																																																																																																																							
Average Cost Per Sex Offender for Treatment and Supervision	27,120	27,120																																																																																																																					
Explanatory:																																																																																																																							
Number of New Civil Commitments	50	50																																																																																																																					
			<u>2016</u>	<u>2017</u>																																																																																																																			
<u>A. Goal: PREPAREDNESS AND PREVENTION</u>																																																																																																																							
<u>Outcome (Results/Impact):</u>																																																																																																																							
<u>Percent of Staff Reached during Public Health Disaster Response Drills</u>	80%	80%																																																																																																																					
<u>Vaccination Coverage Levels among Children Aged 19 to 35 Months</u>	70.4%	70.4%																																																																																																																					
<u>Incidence Rate of TB Among Texas Residents</u>	4.4	4.4																																																																																																																					
<u>Prevalence of Tobacco Use among Middle & High School Youth Target Areas</u>	22%	22%																																																																																																																					
<u>Prevalence of Smoking among Adult Texans</u>	18.6%	18.6%																																																																																																																					
<u>A.1.2. Strategy: HEALTH DATA AND ANALYSIS</u>																																																																																																																							
<u>Efficiencies:</u>																																																																																																																							
<u>Average Number of Days to Certify or Verify Vital Statistics Records</u>	11.1	11.1																																																																																																																					

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base																					
<p><u>A.2.1. Strategy: IMMUNIZE CHILDREN & ADULTS IN TEXAS</u></p> <p><u>Output (Volume):</u></p> <table border="0" style="width: 100%;"> <tr> <td style="width: 80%;">Number of Vaccine Doses Administered to Children</td> <td style="width: 10%; text-align: right;">15,020,205</td> <td style="width: 10%; text-align: right;">15,320,609</td> </tr> </table> <p><u>Explanatory:</u></p> <table border="0" style="width: 100%;"> <tr> <td style="width: 80%;">Dollar Value (in Millions) of Vaccine Provided by the Federal Government</td> <td style="width: 10%; text-align: right;">370</td> <td style="width: 10%; text-align: right;">377</td> </tr> </table> <p><u>A.2.2. Strategy: HIV/STD PREVENTION</u></p> <p><u>Output (Volume):</u></p> <table border="0" style="width: 100%;"> <tr> <td style="width: 80%;">Number of Persons Served by the HIV Medication Program</td> <td style="width: 10%; text-align: right;">20,119</td> <td style="width: 10%; text-align: right;">21,052</td> </tr> </table> <p><u>A.2.3. Strategy: INFECTIOUS DISEASE EPI/SURV AND CONTROL</u></p> <p><u>Output (Volume):</u></p> <table border="0" style="width: 100%;"> <tr> <td style="width: 80%;">Number of Communicable Disease Investigations Conducted</td> <td style="width: 10%; text-align: right;">200,000</td> <td style="width: 10%; text-align: right;">200,000</td> </tr> </table> <p><u>A.3.3. Strategy: ABSTINENCE EDUCATION</u></p> <p><u>Output (Volume):</u></p> <table border="0" style="width: 100%;"> <tr> <td style="width: 80%;">Number of Persons Served in Abstinence Education Programs</td> <td style="width: 10%; text-align: right;">48,000</td> <td style="width: 10%; text-align: right;">48,000</td> </tr> </table> <p><u>A.3.4. Strategy: KIDNEY HEALTH CARE</u></p> <p><u>Output (Volume):</u></p> <table border="0" style="width: 100%;"> <tr> <td style="width: 80%;">Number of Kidney Health Clients Provided Services</td> <td style="width: 10%; text-align: right;">18,782</td> <td style="width: 10%; text-align: right;">18,782</td> </tr> </table> <p><u>A.3.5. Strategy: CHILDREN WITH SPECIAL HEALTH CARE NEEDS</u></p> <p><u>Output (Volume):</u></p> <table border="0" style="width: 100%;"> <tr> <td style="width: 80%;">Average Monthly Caseload of Children with Special Health Care Needs (CSHCN) Clients Receiving Health Care Benefits</td> <td style="width: 10%; text-align: right;">1,008</td> <td style="width: 10%; text-align: right;">1,008</td> </tr> </table> <p><u>B. Goal: COMMUNITY HEALTH SERVICES</u></p> <p><u>Outcome (Results/Impact):</u></p>					Number of Vaccine Doses Administered to Children	15,020,205	15,320,609	Dollar Value (in Millions) of Vaccine Provided by the Federal Government	370	377	Number of Persons Served by the HIV Medication Program	20,119	21,052	Number of Communicable Disease Investigations Conducted	200,000	200,000	Number of Persons Served in Abstinence Education Programs	48,000	48,000	Number of Kidney Health Clients Provided Services	18,782	18,782	Average Monthly Caseload of Children with Special Health Care Needs (CSHCN) Clients Receiving Health Care Benefits	1,008	1,008
Number of Vaccine Doses Administered to Children	15,020,205	15,320,609																							
Dollar Value (in Millions) of Vaccine Provided by the Federal Government	370	377																							
Number of Persons Served by the HIV Medication Program	20,119	21,052																							
Number of Communicable Disease Investigations Conducted	200,000	200,000																							
Number of Persons Served in Abstinence Education Programs	48,000	48,000																							
Number of Kidney Health Clients Provided Services	18,782	18,782																							
Average Monthly Caseload of Children with Special Health Care Needs (CSHCN) Clients Receiving Health Care Benefits	1,008	1,008																							

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
		<u>Percentage of Eligible WIC Population Served</u>	69%	69%
		<u>Number of Infant Deaths Per Thousand Live Births</u> (Infant Mortality Rate)	5.7	5.7
		<u>Percentage of Low Birth Weight Births</u>	8.2%	8.2%
		<u>Number of Pregnant Females Age 13-19 Per Thousand</u> (Adolescent Pregnancy Rate)	45	45
		<u>Percent of Adults Receiving Community Mental Health</u> Services Whose Functional Level Stabilized or Improved	83%	83%
		<u>Percent of Children Receiving Community Mental Health</u> Services Whose Functional Level Stabilized or Improved	82%	82%
		<u>Percent of Persons Receiving Crisis Services Who Avoid</u> Psychiatric Hospitalization within 30 Days	89%	89%
		<u>Percent of Adults Who Complete Treatment Programs who</u> Report Abstinence	90%	90%
		<u>Percent of Youth Who Complete Treatment Programs and</u> Report Abstinence	88%	88%
		<u>B.1.1. Strategy: WIC/FARMER'S MARKET NUTRITION</u>		
		<u>SVCS</u>		
		<u>Output (Volume):</u>		
		<u>Number of WIC Participants Provided Nutritious Food</u> Supplements Per Month	958,644	958,644
		<u>Explanatory:</u>		
		<u>Number of WIC Breastfeeding Initiation Rate</u>	85.6	86.6
		<u>B.1.2. Strategy: WOMEN & CHILDREN'S HEALTH</u>		
		<u>SERVICES</u>		
		<u>Output (Volume):</u>		
		<u>Number of Infants <1 and Children Age 1-21 Years</u> Provided Dental and Child Health Services by the Maternal and Child Health Program	41,733	41,733
		<u>Number of Women over 21 Provided Services by the</u> Maternal and Child Health Program (Title V)	23,412	23,412
		<u>B.1.3. Strategy: FAMILY PLANNING SERVICES</u>		

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
		<p><u>Output (Volume):</u> <u>Number of Adults and Adolescents Receiving Family Planning Services</u> 65,000 65,000</p> <p><u>B.1.4. Strategy: COMMUNITY PRIMARY CARE SERVICES</u></p> <p><u>Output (Volume):</u> <u>Number of Primary Health Care Eligible Patients Provided Access to Primary Care Services</u> 250,000 250,000</p> <p><u>B.2.1. Strategy: MENTAL HEALTH SVCS-ADULTS</u></p> <p><u>Output (Volume):</u> <u>Average Monthly Number of Adults Receiving Community Mental Health Services</u> 56,634 56,634</p> <p><u>Efficiencies:</u> <u>Average Monthly Cost Per Adult Receiving Community Mental Health Services</u> 409 409</p> <p><u>B.2.2. Strategy: MENTAL HEALTH SVCS-CHILDREN</u></p> <p><u>Output (Volume):</u> <u>Average Monthly Number of Children Receiving Community Mental Health Services</u> 12,221 12,221</p> <p><u>B.2.3. Strategy: COMMUNITY MENTAL HEALTH CRISIS SVCS</u></p> <p><u>Output (Volume):</u> <u>Number of Persons Receiving Crisis Residential Services Per Year</u> 21,647 21,647</p> <p><u>Number of Persons Receiving Crisis Outpatient Services Per Year</u> 59,675 59,675</p> <p><u>Efficiencies:</u> <u>Average Amount of GR Spent Per Person for Crisis Residential Services</u> 2,500 2,500</p> <p><u>Average Amount of GR Spent Per Person for Crisis Outpatient Services</u> 600 600</p> <p><u>B.2.4. Strategy: NORTHSTAR BEHAV HLTH WAIVER</u></p> <p><u>Output (Volume):</u></p>		

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base			
		<u>Number of Persons Served by NorthSTAR Behavioral Health Services Per Year</u> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;"></td> <td style="width: 10%; text-align: right;">67,196</td> <td style="width: 10%; text-align: right;">67,196</td> </tr> </table>				67,196	67,196
	67,196	67,196					
		<u>B.2.5. Strategy: SUBSTANCE ABUSE PREV/INTERV/TREAT</u> <u>Output (Volume):</u>					
		<u>Average Monthly Number of Adults Served in Substance Abuse Prevention Programs</u> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;"></td> <td style="width: 10%; text-align: right;">44,000</td> <td style="width: 10%; text-align: right;">44,000</td> </tr> </table>				44,000	44,000
	44,000	44,000					
		<u>Average Monthly Number of Youth Served in Substance Abuse Prevention Programs</u> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;"></td> <td style="width: 10%; text-align: right;">172,000</td> <td style="width: 10%; text-align: right;">172,000</td> </tr> </table>				172,000	172,000
	172,000	172,000					
		<u>Average Monthly Number of Adults Served in Substance Abuse Intervention Programs</u> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;"></td> <td style="width: 10%; text-align: right;">9,000</td> <td style="width: 10%; text-align: right;">9,000</td> </tr> </table>				9,000	9,000
	9,000	9,000					
		<u>Average Monthly Number of Youth Served in Substance Abuse Intervention Programs</u> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;"></td> <td style="width: 10%; text-align: right;">1,400</td> <td style="width: 10%; text-align: right;">1,400</td> </tr> </table>				1,400	1,400
	1,400	1,400					
		<u>Average Monthly Number of Adults Served in Treatment Programs for Substance Abuse</u> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;"></td> <td style="width: 10%; text-align: right;">7,597</td> <td style="width: 10%; text-align: right;">7,597</td> </tr> </table>				7,597	7,597
	7,597	7,597					
		<u>Average Monthly Number of Youth Served in Treatment Programs for Substance Abuse</u> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;"></td> <td style="width: 10%; text-align: right;">1,254</td> <td style="width: 10%; text-align: right;">1,254</td> </tr> </table>				1,254	1,254
	1,254	1,254					
		<u>B.3.1. Strategy: EMS AND TRAUMA CARE SYSTEMS</u> <u>Output (Volume):</u>					
		<u>Number of Emergency Health Care Providers (EMS Firms, Hospitals, RACS) Assisted through EMS/Trauma System Funding Programs</u> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;"></td> <td style="width: 10%; text-align: right;">2,337</td> <td style="width: 10%; text-align: right;">2,337</td> </tr> </table>				2,337	2,337
	2,337	2,337					
		<u>Explanatory:</u>					
		<u>Number of Trauma Facilities</u> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;"></td> <td style="width: 10%; text-align: right;">280</td> <td style="width: 10%; text-align: right;">280</td> </tr> </table>				280	280
	280	280					
		<u>Number of Stroke Facilities</u> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;"></td> <td style="width: 10%; text-align: right;">125</td> <td style="width: 10%; text-align: right;">125</td> </tr> </table>				125	125
	125	125					
		<u>C. Goal: HOSPITAL FACILITIES AND SERVICES</u> <u>C.1.1. Strategy: TX CENTER FOR INFECTIOUS DISEASE</u> <u>Output (Volume):</u>					
		<u>Number of Inpatient Days, Texas Center for Infectious Disease</u> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;"></td> <td style="width: 10%; text-align: right;">12,700</td> <td style="width: 10%; text-align: right;">12,700</td> </tr> </table>				12,700	12,700
	12,700	12,700					

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
<p><u>C.1.2. Strategy: RIO GRANDE STATE OUTPATIENT CLINIC</u> <u>Output (Volume):</u> <u>Number of Outpatient Visits, Rio Grande State Outpatient Clinic</u> 37,404 37,404</p> <p><u>C.1.3. Strategy: MENTAL HEALTH STATE HOSPITALS</u> <u>Output (Volume):</u> <u>Average Daily Census of State Mental Health Facilities</u> 2,376 2,376</p> <p><u>Efficiencies:</u> <u>Average Daily Facility Cost Per Occupied State Mental Health Facility Bed</u> 466 466</p> <p><u>C.2.1. Strategy: MENTAL HEALTH COMMUNITY HOSPITALS</u> <u>Output (Volume):</u> <u>Average Daily Number of Occupied Mental Health Community Hospital Beds</u> 316 316</p> <p><u>Efficiencies:</u> <u>Average Daily Cost Per Occupied Mental Health Community Hospital Bed</u> 483 483</p> <p><u>D. Goal: CONSUMER PROTECTION SERVICES</u> <u>Outcome (Results/Impact):</u> <u>Percentage of Licenses Issued within Regulatory Timeframe</u> 98.7% 98.7%</p> <p><u>D.1.1. Strategy: FOOD (MEAT) AND DRUG SAFETY</u> <u>Efficiencies:</u> <u>Average Cost Per Surveillance Activity - Food/Meat and Drug Safety</u> 295 295</p> <p><u>D.1.2. Strategy: ENVIRONMENTAL HEALTH</u> <u>Efficiencies:</u></p>				

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
		<u>Average Cost Per Surveillance Activity -</u> <u>Environmental Health</u> 200 200 <u>D.1.3. Strategy: RADIATION CONTROL</u> <u>Efficiencies:</u> <u>Average Cost Per Surveillance Activity - Radiation</u> <u>Control</u> 300 300 <u>D.1.4. Strategy: HEALTH CARE PROFESSIONALS</u> <u>Output (Volume):</u> <u>Number of Health Care Professionals and Licensed</u> <u>Chemical Dependency Counselors Licensed, Permitted,</u> <u>Certified, Registered, or Documented</u> 100,000 100,000 <u>G. Goal: OFFICE VIOLENT SEX OFFENDER MGMT</u> <u>G.1.1. Strategy: OFFICE VIOLENT SEX OFFENDER</u> <u>MGMT</u> <u>Output (Volume):</u> <u>Number of Sex Offenders Provided Treatment and</u> <u>Supervision</u> 253 253 <u>Efficiencies:</u> <u>Average Cost Per Sex Offender for Treatment and</u> <u>Supervision</u> 27,120 27,120 <u>Explanatory:</u> <u>Number of New Civil Commitments</u> 50 50		
2	II-55	<p>Capital Budget. None of the funds appropriated above may be expended for capital budget items except as listed below. The amounts shown below shall be expended only for the purposes shown and are not available for expenditure for other purposes. Amounts appropriated above and identified in this provision as appropriations either for "Lease Payments to the Master Lease Purchase Program" or for items with an "(MLPP)" notation shall be expended only for the purpose of making lease purchase payments to the Texas Public Finance Authority pursuant to the provisions of Government Code, §1232.103.</p> <p style="text-align: right;">2014 _____ 2015</p>		

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
a. Construction of Buildings and Facilities				
(1) Laboratory — Bond Debt Service \$ 2,873,125 \$ 2,871,875				
Total, Construction of Buildings and				
Facilities \$ 2,873,125 \$ 2,871,875				
b. Repair or Rehabilitation of Buildings and				
Facilities				
(1) North Texas State Hospital — Victory				
— Field Repair and Renovation \$ 4,429,436 UB				
(2) State Hospitals — Repair and Renovation 10,000,000 UB				
Total, Repair or Rehabilitation of				
Buildings and Facilities \$ 14,429,436 UB				
c. Acquisition of Information Resources				
— Technologies				
(1) WIC PC Replacement \$ 4,109,165 \$ 4,010,165				
(2) Seat Management 6,120,652 5,976,952				
(3) IT Accessibility 1,079,943 1,079,943				
(4) Critical Information Technology — Mental				
Health State Hospitals 1,660,000 0				
(5) Information Technology Security				
— Improvements 1,200,000 1,200,000				
(6) Enhance Registries 3,461,999 344,000				
(7) Information System Improvements 28,068,288 13,668,938				
(8) BIPP: Level 1 Screening Tool 325,000 217,000				
(9) Compliance with Federal HIPAA (Health				
Insurance Portability and Accountability				
— Act) Regulations 288,649 707,914				
(10) Improve Client CARE Systems — Enterprise \$ 3,500,000 \$ 3,500,000				

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
		Total, Acquisition of Information		
		Resource Technologies	\$ 49,813,636	\$ 30,704,912
		d. Transportation Items		
		(1) Vehicles Replacement	\$ 1,829,927	\$ 220,579
		Total, Transportation Items	\$ 1,829,927	\$ 220,579
		e. Acquisition of Capital Equipment and Items		
		(1) Laboratory Equipment	\$ 2,491,168	\$ 1,515,692
		(2) Capital Equipment for Mental Health		
		Facilities	6,888,522	0
		(3) State Hospital Patient Safety and		
		Operations - Cameras	6,381,000	0
		Total, Acquisition of Capital Equipment		
		and Items	\$ 15,760,690	\$ 1,515,692
		f. Other Lease Payments to the Master Lease		
		Purchase Program (MLPP)		
		(1) Lease Payments to MLPP - Mental Health		
		Energy Conservation	\$ 2,885,463	\$ 2,867,584
		Total, Other Lease Payments to the Master		
		Lease Purchase Program (MLPP)	\$ 2,885,463	\$ 2,867,584
		g. Data Center Consolidation		
		(1) Data Center Consolidation	\$ 16,378,529	\$ 16,851,911
		Total, Data Center Consolidation	\$ 16,378,529	\$ 16,851,911
		Total, Capital Budget	\$ 103,970,806	\$ 55,032,533

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
Method of Financing (Capital Budget):				
General Revenue Fund				
General Revenue Fund \$ 46,037,549 \$ 25,066,525				
GR Match for Medicaid 319,324 340,084				
GR Certified as Match for Medicaid 175,000 175,000				
GR for Mental Health Block Grant 64,326 63,574				
GR for Substance Abuse Prevention and Treatment				
— Block Grant 80,871 63,466				
GR for HIV Services 151,713 149,900				
General Revenue— Insurance Companies				
Maintenance Tax and Insurance Department Fees 12,042 11,745				
Subtotal, General Revenue Fund \$ 46,840,825 \$ 25,870,294				
General Revenue Fund— Dedicated				
Vital Statistics Account No. 019 32,834 32,025				
Hospital Licensing Account No. 129 3,234 3,154				
Food and Drug Fee Account No. 341 4,923 4,802				
Bureau of Emergency Management Account No. 512 5,549 5,412				
Department of Health Public Health Services Fee				
Account No. 524 278,862 271,989				
Commission on State Emergency Communications				
Account No. 5007 63 61				
Asbestos Removal Licensure Account No. 5017 95,410 94,078				
Workplace Chemicals List Account No. 5020 1,715 1,673				
Certificate of Mammography Systems Account No.				
5021 753 734				
Food and Drug Registration Account No. 5024 32,558 12,249				
Permanent Fund for Health and Tobacco Education				
and Enforcement Account No. 5044 20,992 20,475				
Permanent Fund Children & Public Health Account				
No. 5045 550 536				

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
Permanent Fund for EMS & Trauma Care Account				
No. 5046 2,594 2,531				
EMS, Trauma Facilities, Trauma Care Systems				
Account No. 5108 127 124				
Trauma Facility and EMS Account No. 5111 731 713				
Health Department Laboratory Financing Fees				
Account No. 8026 2,873,125 2,871,875				
Subtotal, General Revenue Fund - Dedicated \$ 3,354,020 \$ 3,322,431				
Federal Funds 41,091,505 24,405,372				
Other Funds				
Appropriated Receipts 1,462 1,426				
DSHS Public Health Medicaid Reimbursements 2,677,567 1,427,736				
Interagency Contracts 5,427 5,294				
Bond Proceeds - General Obligation Bonds 10,000,000 0				
Subtotal, Other Funds \$ 12,684,456 \$ 1,434,456				
Total, Method of Financing \$103,970,806 \$ 55,032,553				
<p><u>Capital Budget.</u> None of the funds appropriated above may be expended for capital budget items except as listed below. The amounts shown below shall be expended only for the purposes shown and are not available for expenditure for other purposes. Amounts appropriated above and identified in this provision as appropriations either for "Lease Payments to the Master Lease Purchase Program" or for items with an "(MLPP)" notation shall be expended only for the purpose of making lease-purchase payments to the Texas Public Finance Authority pursuant to the provisions of Government Code, §1232.103.</p>				
<div style="text-align: right; margin-right: 100px;"> <u>2016</u> <u>2017</u> </div>				
a. Construction of Buildings and Facilities				
(1) Laboratory - Bond Debt Service \$ 2,874,375 \$ 2,036,750				
Total, Construction of Buildings and Facilities \$ 2,874,375 \$ 2,036,750				
b. Acquisition of Information Resource				

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
<u>Technologies</u>				
(1) WIC PC Replacement \$ 3,070,165 \$ 3,585,165				
(2) Seat Management 6,120,652 5,976,952				
(3) IT Accessibility 1,079,943 1,079,943				
(4) Critical Information Technology -				
MH State Hospitals 1,660,000 UB				
(5) IT Security 1,200,000 1,200,000				
(6) Enhance Registries 1,277,830 UB				
(7) Information Systems Improvements 15,445,800 1,680,000				
(8) CARE 3,400,000 3,400,000				
(9) Linking Data for Health Information Quality 1,000,000 1,000,000				
<u>Total, Acquisition of Information Resource Technologies</u>				
\$ 34,254,390 \$ 17,922,060				
<u>c. Transportation Items</u>				
(1) Vehicles Replacement \$ 18,235 UB				
<u>Total, Transportation Items</u>				
\$ 18,235 UB				
<u>d. Acquisition of Capital Equipment and Items</u>				
(1) Laboratory Equipment \$ 2,435,822 \$ 2,031,909				
(2) Capital Equipment for Mental Health Facilities 1,650,000 1,650,000				
(3) Hospital Cameras 1,000,000 UB				
<u>Total, Acquisition of Capital Equipment and Items</u>				
\$ 5,085,822 \$ 3,681,909				
<u>e. Other Lease Payments to the Master Lease Purchase Program (MLPP)</u>				
(1) Lease payments to MLPP – Mental Health –				
Energy Conservation \$ 2,476,134 \$ 2,458,825				

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
<u>Total, Other Lease Payments to the Master Lease</u> <u>Purchase Program (MLPP)</u> \$ 2,476,134 \$ 2,458,825				
<u>f. Data Center Consolidation</u> <u>(1) Data Center Consolidation</u> \$ 16,378,529 \$ 16,851,911				
<u>Total, Data Center Consolidation</u> \$ 16,378,529 \$ 16,851,911				
<u>Total, Capital Budget</u> \$ 61,087,485 \$ 42,951,455				
<u>Method of Financing (Capital Budget):</u>				
<u>General Revenue Fund</u>				
<u>General Revenue Fund</u> \$ 25,303,844 \$ 22,635,632				
<u>GR Match for Medicaid</u> 187,237 187,231				
<u>GR Certified Match for Medicaid</u> 153,000 153,000				
<u>GR for Mental Health Block Grant</u> 63,549 63,574				
<u>GR for Substance Abuse Prevention and Treatment</u>				
<u>Block Grant</u> 29,178 28,746				
<u>GR for HIV Services</u> 3,191,783 3,278,661				
<u>General Revenue - Insurance Companies</u>				
<u>Maintenance Tax and Insurance Department Fees</u> 11,415 11,745				
<u>Subtotal, General Revenue Fund</u> \$ 28,940,006 \$ 26,358,589				
<u>General Revenue Fund - Dedicated</u>				
<u>Vital Statistics Account No. 019</u> 31,125 32,025				
<u>Hospital Licensing Account No. 129</u> 3,065 3,154				
<u>Food and Drug Fee Account No. 341</u> 4,667 4,802				
<u>Bureau of Emergency Management Account No. 512</u> 5,260 5,412				
<u>Department of Health Public Health Services Fee</u>				
<u>Account No. 524</u> 264,349 271,989				
<u>Commission on State Emergency Communications</u>				

Agency Code:	Agency Name:	Prepared By:	Date:	Request Level:
537	Department of State Health Services	Becky O'Brien	8/11/2014	Base
		<u>Account No. 5007</u>	59	61
		<u>Asbestos Removal Licensure Account No. 5017</u>	93,590	94,078
		<u>Workplace Chemicals List Account No. 5020</u>	1,626	1,673
		<u>Certificate of Mammography Systems Account No. 5021</u>	713	734
		<u>Food and Drug Registration Account No. 5024</u>	11,905	12,249
		<u>Permanent Fund for Health and Tobacco Education and Enforcement Account No. 5044</u>	19,900	20,475
		<u>Permanent Fund Children & Public Health Account No. 5045</u>	521	536
		<u>Permanent Fund for EMS & Trauma Care Account No. 5046</u>	2,460	2,531
		<u>EMS, Trauma Facilities, Trauma Care Systems Account No. 5108</u>	121	124
		<u>Trauma Facility and EMS Account No. 5111</u>	693	713
		<u>Health Department Laboratory Financing Fees Account No. 8026</u>	2,874,375	2,036,750
		<u>Subtotal, General Revenue Fund - Dedicated</u>	\$ 3,314,429	\$ 2,487,306
		<u>Federal Funds</u>	24,237,867	11,585,104
		<u>Other Funds</u>		
		<u>Appropriated Receipts</u>	1,279,216	1,426
		<u>DSHS Public Health Medicaid Reimbursements</u>	2,310,822	1,513,736
		<u>Interagency Contracts</u>	1,005,145	1,005,294
		<u>Subtotal, Other Funds</u>	\$ 4,595,183	\$ 2,520,456
		<u>Total, Method of Financing</u>	\$ 61,087,485	\$ 42,951,455
3	II-57	Client Services. It is the intent of the Legislature that the Department of State Health Services (DSHS) and the Department of Family and Protective Services (DFPS) enter into a Memorandum of Understanding for providing outpatient substance abuse treatment services by DSHS to referred DFPS clients.		

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
4	II-57	<p>Notification of Intent to Utilize Additional Federal SAPT Block Grant Funds. The Department of State Health Services (DSHS) shall notify the Legislative Budget Board and the Governor of its intent to use additional federal Substance Abuse Prevention and Treatment (SAPT) block grant funds in excess of the amounts specifically appropriated in the strategies above, which total \$135,553,790 for fiscal year 2014 and \$135,536,510 for fiscal year 2015. This notification shall explain the services to be provided, the original source of funding for the program or services or indicate that programs or services are being expanded beyond levels assumed in the appropriations act, and the grant and amount of the grant funds to be used. The notification shall be submitted at least 45 days prior to allocations made out of funds appropriated above.</p> <p><i>Delete. SAPT is reported monthly similar to other federal grants under Rider 5 (a) and (d).</i></p>		
5	II-57	<p>Other Reporting Requirements.</p> <p>a. Federal Reports. The Department of State Health Services shall submit the following information to the Legislative Budget Board and the Governor no later than the date the respective report is submitted to the federal government:</p> <ol style="list-style-type: none"> (1) Notification of proposed State Plan amendments and waivers for the Maternal and Child Health Block Grant (Title V of the Social Security Act), the Special Supplemental Food Program for Women, Infants and Children Program (Child Nutrition Act of 1966), and the Substance Abuse, Prevention and Treatment Block Grant and any other federal grant requiring a state plan. State Plan amendments and waiver submissions shall also be provided to the Senate Health and Human Services, House Human Services, and House Public Health committees. (2) A copy of each report or petition submitted to the federal government relating to the grants and programs noted above under section a (1). <p>b. Federal Issues. The Department of State Health Services shall notify the Legislative Budget Board and the Governor on a timely basis about emerging issues that could result in the loss of more than \$1,000,000 in federal revenue assumed in the appropriations act.</p> <p>c. SAPT Maintenance of Effort Calculation. The Department of State Health Services shall submit by September 1 of</p>		

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
		<p>each year of the biennium to the Legislative Budget Board and the Governor a detailed analysis of all funds used for the calculation of the Substance Abuse Prevention and Treatment Block Grant Maintenance of Effort requirement for fiscal years 2013, 2014, and 2015. The report shall be in a format prescribed by the Legislative Budget Board and shall be accompanied by any supporting documentation detailing the sources and methodologies utilized in the calculation.</p> <p>d. Monthly Financial Reports. The Department of State Health Services shall submit the following information to the Legislative Budget Board and the Governor, and make available to the public, on a monthly basis:</p> <ul style="list-style-type: none"> (1) Information on appropriated, budgeted, expended, and projected funds, by strategy and method of finance. (2) Narrative explanations of significant budget adjustments, ongoing budget issues, and other as appropriate. (3) Collections, expenditures, and balances for revenues generated by the department as of the last day of the prior month. (4) Any other information requested by the Legislative Budget Board or the Governor. <p>e. The monthly financial reports shall be prepared in a format specified by the Legislative Budget Board.</p> <p><i>5(c) Recommend for deletion. Other grants have MOE requirements without Rider language.</i></p>		
6	II-58	<p>Mental Health Community Hospital Medicaid Services. The Harris County Psychiatric Center, Lubbock Community Hospital, and St. Joseph Hospital in Houston shall certify appropriated state funds to the Health and Human Services Commission or its designee for the state share of Medicaid reimbursement for the following services:</p> <ul style="list-style-type: none"> a. Inpatient psychiatric services for children. b. Inpatient psychiatric services for age 65 and over (Institute for Mental Disease option). <p>The Department of State Health Services shall report monthly to the Legislative Budget Board and the Governor on the amounts certified by each mental health community hospital.</p>		

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base																								
7	II-58	<p>Performance Contracts. Funds in Strategy C.2.1, Mental Health Community Hospitals, shall be allocated through performance contracts with local mental health authorities.</p> <p><i>Delete. In the past, all contracts flowed through the LMHAs; however, with expansion of private beds some contracts are issued directly with Community MH Hospitals.</i></p>																										
8	II-58	<p>Transfers of Appropriation - State Owned Hospitals. The Department of State Health Services (DSHS) shall transfer from non-Medicaid state appropriated funds the following amounts to the Health and Human Services Commission for the Disproportionate Share Hospital Reimbursement Program:</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 60%;"></th> <th style="width: 20%; text-align: center;"><u>2014</u></th> <th style="width: 20%; text-align: center;"><u>2015</u></th> </tr> </thead> <tbody> <tr> <td>State Mental Health Hospitals</td> <td style="text-align: right;">\$215,096,138</td> <td style="text-align: right;">\$215,096,138</td> </tr> <tr> <td>Texas Center for Infectious Disease</td> <td style="text-align: right;">5,862,342</td> <td style="text-align: right;">5,862,342</td> </tr> <tr> <td></td> <td style="text-align: right;">\$229,829,054</td> <td style="text-align: right;">\$229,829,054</td> </tr> <tr> <td></td> <td style="text-align: center;"><u>2016</u></td> <td style="text-align: center;"><u>2017</u></td> </tr> <tr> <td>State Mental Health Hospitals</td> <td style="text-align: right;"><u>\$215,096,138</u></td> <td style="text-align: right;"><u>\$215,096,138</u></td> </tr> <tr> <td>Texas Center for Infectious Disease</td> <td style="text-align: right;"><u>5,862,342</u></td> <td style="text-align: right;"><u>5,862,342</u></td> </tr> <tr> <td></td> <td style="text-align: right;"><u>\$229,829,054</u></td> <td style="text-align: right;"><u>\$229,829,054</u></td> </tr> </tbody> </table> <p>The timing and form of such transfers shall be determined by the Comptroller of Public Accounts in consultation with the Health and Human Services Commission. The Legislative Budget Board is authorized to adjust the amounts of such transfers as necessary to match available federal funds. The department shall also transfer non-Medicaid state appropriated funds as necessary for other qualifying state-funded community hospitals including mental health community hospitals. DSHS shall monitor Medicaid utilization rates at these state-owned hospitals to ensure their qualification for the Disproportionate Share Hospital Reimbursement Program.</p> <p><i>Updated fiscal years. Amounts need to be changed based on the new FMAP.</i></p>				<u>2014</u>	<u>2015</u>	State Mental Health Hospitals	\$215,096,138	\$215,096,138	Texas Center for Infectious Disease	5,862,342	5,862,342		\$229,829,054	\$229,829,054		<u>2016</u>	<u>2017</u>	State Mental Health Hospitals	<u>\$215,096,138</u>	<u>\$215,096,138</u>	Texas Center for Infectious Disease	<u>5,862,342</u>	<u>5,862,342</u>		<u>\$229,829,054</u>	<u>\$229,829,054</u>
	<u>2014</u>	<u>2015</u>																										
State Mental Health Hospitals	\$215,096,138	\$215,096,138																										
Texas Center for Infectious Disease	5,862,342	5,862,342																										
	\$229,829,054	\$229,829,054																										
	<u>2016</u>	<u>2017</u>																										
State Mental Health Hospitals	<u>\$215,096,138</u>	<u>\$215,096,138</u>																										
Texas Center for Infectious Disease	<u>5,862,342</u>	<u>5,862,342</u>																										
	<u>\$229,829,054</u>	<u>\$229,829,054</u>																										

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
9	II-58	<p>Disposition of Construction Appropriation. Construction appropriations may be used to pay salaries and travel expenses of department engineers and architects and administrative expenses of construction projects (but shall not exceed \$500,000 in a fiscal year that are paid out of General Obligation Bonds); architect's and engineer's fees; and the actual travel expenses incurred by them or their representatives in making trips of inspection at the discretion of the department during construction, renovation, or repair of buildings and systems or the installation of fixed equipment. Job titles and rates of pay for such salaried positions of department personnel paid from construction appropriations shall conform to the Position Classification Plan and Classification Salary Schedule.</p>		
10	II-59	<p>Appropriation of Local Funds. All funds received by the department from counties, cities, and any other local governmental entities and all balances from such sources as of August 31, 2013<u>2015</u>, are hereby appropriated for the biennium ending August 31, 2015<u>2017</u>, for the purpose of carrying out the provisions of this Act. (Estimated to be \$0.)</p> <p><i>Updated fiscal years.</i></p>		
11	II-59	<p>Unexpended Construction Balances.</p> <p>a. Mental Health Facilities. Any unexpended construction, repair, or renovation balances from previous appropriations, estimated to be \$0 from fiscal year 2013<u>2015</u> to fiscal year 2014<u>2016</u> and included in the method of finance above as General Obligation Bond proceeds in Strategy F.1.2, Capital Repair and Renovation: Mental Health Facilities are hereby appropriated to the Department of State Health Services (DSHS) for the same purposes.</p> <p>b. Authorization. Authorization to expend the unexpended construction balances is contingent upon submission of the following reports to the Legislative Budget Board and the Governor. At the same time, the agency shall provide a copy of the reports to the Comptroller of Public Accounts.</p> <p>(1) a report by September 1, 2013<u>2015</u> providing actual expenditures for fiscal years 2012<u>2014</u> and 2013<u>2015</u>, and planned expenditures for fiscal years 2014<u>2016</u> and 2015<u>2017</u> at the project/mental health state hospital level; and</p> <p>(2) a report by March 1 and September 1 of each fiscal year reflecting actual expenditures by project/mental health state hospital for the previous six months. Additional information requested by the Legislative Budget Board or the</p>		

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
		<p>Governor should be provided in a timely manner. The notification and information provided subsequently shall be prepared in a format specified by the Legislative Budget Board.</p> <p>The planned expenditures shall be considered to be approved unless the Legislative Budget Board or the Governor issues a written disapproval within 15 business days of the date on which the staff of the Legislative Budget Board concludes its review of the proposal to expend the funds and forwards its review to the Chair of the House Appropriations Committee, Chair of the Senate Finance Committee, Speaker of the House, and Lieutenant Governor. The Comptroller of Public Accounts shall not allow the use of unexpended balances if the Legislative Budget Board provides notification to the Comptroller of Public Accounts that the requirements of this provision have not been satisfied.</p> <p><i>Updated fiscal years.</i></p>		
12	II-59	<p>Mental Health Appropriation Transfer Between Fiscal Years. In addition to the transfer authority provided elsewhere in this Act, the Department of State Health Services may transfer appropriations made for the fiscal year ending August 31, 2015<u>2017</u>, to the fiscal year ending August 31, 2014<u>2016</u>, subject to the following conditions provided by this section:</p> <p>a. Transfers under this section may be made only:</p> <ul style="list-style-type: none"> (1) if costs associated with managing the Mental Health State Hospitals exceed the funds appropriated for these services for fiscal year 2014<u>2016</u>; or (2) for any emergency expenditure requirements, including expenditures necessitated to ensure the continuation of Medicaid client services to maintain fiscal year 2013<u>2015</u> Medicaid caseloads; or (3) if appropriated receipts generated through MH hospital-related programs required to fund appropriations contained in this Act for fiscal year 2014<u>2016</u> are less than those contained in the method of financing for the department for fiscal year 2014<u>2016</u>. <p>b. Transfers may not exceed \$15,000,000 in General Revenue.</p>		

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
		<p>c. A transfer authorized by this section must receive the prior approval of the Legislative Budget Board and the Governor.</p> <p>d. The Comptroller of Public Accounts shall cooperate as necessary to assist the completion of a transfer and spending made under this section.</p> <p><i>Updated fiscal years.</i></p>		
13	II-60	<p>Limitation: Transfer Authority.</p> <p>a. Notification Regarding Transfers. Authority granted elsewhere in this Act to transfer funds between any of the Department of State Health Services (DSHS) strategies is contingent upon a written notification from DSHS to the Legislative Budget Board and the Governor at least 30 days prior to the transfer, which includes the following information:</p> <p style="padding-left: 40px;">(1) a detailed explanation of the purpose(s) of the transfer and whether the expenditure will be one time or ongoing;</p> <p style="padding-left: 40px;">(2) the name of the originating and receiving strategies and the method of financing and FTEs for each strategy by fiscal year;</p> <p style="padding-left: 40px;">(3) an estimate of performance levels and, where relevant, a comparison to targets included in this Act for both the originating and the receiving strategies; and</p> <p style="padding-left: 40px;">(4) the capital budget impact.</p> <p>b. Transfers that Require Prior Approval. Transfers to Goal E, Indirect Administration, from other DSHS goals are not permitted without prior written approval. To request approval the agency shall provide the information listed under section (a) to the Legislative Budget Board and the Governor. At the same time, the agency shall provide a copy of the request to the Comptroller of Public Accounts.</p> <p>e. Cost Pools. Notwithstanding the above limitations, transfers may be made from the appropriation items in section (a) to separate accounts authorized by agency rider and established by the State Comptroller for payment of certain support</p>		

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
		<p>costs not directly attributable to a single program.</p> <p>d. Cash Management. Notwithstanding the above limitations, DSHS may temporarily utilize funds for cash flow purposes. All funding used in this manner shall be promptly returned to the originating strategy. This authorization is subject to limitations established by the Comptroller of Public Accounts.</p> <p>The Comptroller of Public Accounts shall not allow the transfer of funds authorized by any of the above subsections if the Legislative Budget Board provides notification to the Comptroller of Public Accounts that the requirements of this provision have not been satisfied.</p> <p>In the case of disaster or other emergency, this provision is superseded by the emergency related transfer authority in Article IX of this Act.</p> <p>Delete. Revert to Article IX Section 14.01 Appropriation Transfers for Sections a. and b. Sections c. and d. are contingent on approval of new riders for cost pools and cash management.</p>		
14	II-60	<p>Laboratory Funding.</p> <p>a. All receipts generated by the Department of State Health Services (DSHS) from laboratory fees during the 2014-15 <u>2016-17</u> biennium and deposited in General Revenue-Dedicated Account No. 524 under Revenue Object 3561 are hereby appropriated to the DSHS for transfer to the Texas Public Finance Authority for the payment of debt services on the project revenue bonds.</p> <p>b. Appropriations made out of the General Revenue Fund to DSHS in Goal E, Indirect Administration, may be transferred for bond debt service payments only if laboratory fees generated by the laboratory during the biennium are insufficient to support the bond debt service, subject to prior approval of the Governor and the Legislative Budget Board and if no funds appropriated to DSHS by this Act have been transferred into Goal E, Indirect Administration.</p> <p>c. Included in the appropriations made above in Strategy A.4.1, Laboratory Services, is \$12,820,645 <u>\$12,933,531</u> in fiscal year 2014 <u>2016</u> and \$13,046,417 <u>\$12,933,531</u> in fiscal year 2015 <u>2017</u> from General Revenue-Dedicated Account No. 524. These amounts include an unexpended balance of \$0 from the 2012-13 <u>2014-15</u> biennium.</p>		

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base										
		<i>Updated fiscal years. Leveled amounts between fiscal years.</i>												
15	II-60	<p>Appropriations Limited to Revenue Collections. The Department of State Health Services (DSHS) shall review all of the fee schedules within its authority on an annual basis. The DSHS shall provide a copy of the report to the Legislative Budget Board and the Governor no later than January 1 of each year of the biennium. It is the intent of the Legislature that, to the extent feasible, fees, fines, and other miscellaneous revenues as authorized and generated by the department cover, at a minimum, the cost of the appropriations made for the programs listed in the table below, as well as the "other direct and indirect costs" associated with these programs, appropriated elsewhere in this Act. "Other direct and indirect costs" for these programs are estimated to be \$6,508,875,735,997 for fiscal year 20142016 and \$6,963,1186,735,997 for fiscal year 20152017. In the event that actual and/or projected revenue collections are insufficient to offset the costs identified by this provision, the Legislative Budget Board may direct that the Comptroller of Public Accounts reduce the appropriation authority provided above to be within the amount of revenue expected to be available. This rider shall apply to revenues generated in the following strategies and deposited under the following revenue codes or account numbers:</p> <table border="0"> <thead> <tr> <th data-bbox="506 781 1003 813">Strategy</th> <th data-bbox="1024 781 1352 813">Revenue Code or Account</th> </tr> </thead> <tbody> <tr> <td data-bbox="506 849 915 881">D.1.1. Food (Meat) & Drug Safety</td> <td data-bbox="1024 881 1367 914">341 Food & Drug Retail Fee</td> </tr> <tr> <td></td> <td data-bbox="1024 950 1241 982">5022 Oyster Sales</td> </tr> <tr> <td></td> <td data-bbox="1024 1018 1402 1050">5024 Food & Drug Registration</td> </tr> <tr> <td></td> <td data-bbox="1024 1086 1980 1343">Fees deposited into 001 to support D.1.1, Food (Meat) and Drug Safety, including fees deposited under the following Revenue Codes: 3142 (Food Service Worker Training); 3180 (Health Regulation Fees, for Body Piercing and Tattoo Studios, Tanning Facility Fees, and Narcotic Treatment Fees); 3400 (Business Fees-Agriculture, for Renderers Licenses and Milk Industry Products); 3414 (Agriculture Inspection Fees, for Meat Inspection); 3554 (Food and Drug Fees, for Medical Device Wholesalers, Food Drug and Cosmetic Sales, and Frozen Desserts).</td> </tr> </tbody> </table>			Strategy	Revenue Code or Account	D.1.1. Food (Meat) & Drug Safety	341 Food & Drug Retail Fee		5022 Oyster Sales		5024 Food & Drug Registration		Fees deposited into 001 to support D.1.1, Food (Meat) and Drug Safety, including fees deposited under the following Revenue Codes: 3142 (Food Service Worker Training); 3180 (Health Regulation Fees, for Body Piercing and Tattoo Studios, Tanning Facility Fees, and Narcotic Treatment Fees); 3400 (Business Fees-Agriculture, for Renderers Licenses and Milk Industry Products); 3414 (Agriculture Inspection Fees, for Meat Inspection); 3554 (Food and Drug Fees, for Medical Device Wholesalers, Food Drug and Cosmetic Sales, and Frozen Desserts).
Strategy	Revenue Code or Account													
D.1.1. Food (Meat) & Drug Safety	341 Food & Drug Retail Fee													
	5022 Oyster Sales													
	5024 Food & Drug Registration													
	Fees deposited into 001 to support D.1.1, Food (Meat) and Drug Safety, including fees deposited under the following Revenue Codes: 3142 (Food Service Worker Training); 3180 (Health Regulation Fees, for Body Piercing and Tattoo Studios, Tanning Facility Fees, and Narcotic Treatment Fees); 3400 (Business Fees-Agriculture, for Renderers Licenses and Milk Industry Products); 3414 (Agriculture Inspection Fees, for Meat Inspection); 3554 (Food and Drug Fees, for Medical Device Wholesalers, Food Drug and Cosmetic Sales, and Frozen Desserts).													

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
		<p>D.1.2. Environmental Health</p> <p>5017 Asbestos Removal Licensure</p> <p>5020 Workplace Chemical List</p> <p>Fees deposited into 001 to support D.1.2, Environmental Health, including fees deposited under the following Revenue Codes: 3123 (Volatile Chemical Sales Permit); 3141 (Bedding Permit Fees); 3175 (Professional Fees, for Code Enforcement Officers and Mold Assessors); 3180 (Health Regulation Fees, for Lead-Based Paint Certification Program); 3555 (Hazardous Substance Manufacture); 3562 (Health Related Professional Fees, for Sanitarian Registration and Pesticide Use and Application Program); and 3573 (Health Licenses for Camps, for Youth Camps).</p> <p>D.1.3 Radiation Control</p> <p>5021 Certification of Mammography Systems</p> <p>Fees deposited into 001 to support D.1.3, Radiation Control, including fees deposited under the following Revenue Codes: 3589 (Radioactive Materials and Devices for Equipment Regulation).</p> <p>D.1.4. Health Care Professionals</p> <p>Fees deposited into 001 to support D.1.4, Health Care Professionals, including fees deposited under the following Revenue Codes: 3175 (Professional Fees, for Health Services Providers and Athletic Trainers); 3560 (Medical Examination and Registration, for Perfusionists, Medical Radiologic Technicians, and Respiratory Therapists); 3562 (Health Related Professional Fees, for Medical Physicists, Hearing Aid Dispensers, Marriage and Family Therapists, Massage Therapists, Respiratory Care Practitioners, Professional Counselors, Dispensing Opticians, Speech Pathologists, Dieticians, Dyslexia Practitioners and Chemical Dependency Counselors); 3616 (Social Worker Regulation); and 3727 (Fees for Administrative Services, for Council on Sex Offender Treatment Providers).</p>		

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
		<p>D.1.5. Health Care Facilities</p> <p>129 Hospital Licensing</p> <p>Fees deposited into 001 to support D.1.5, Health Care Facilities, including fees deposited under the following Revenue Codes: 3180 (Health Regulation Fees, for Special Care Facilities); and 3557 (Health Care Facilities Fees, for Abortion Clinics, Ambulatory Surgical Centers, Birthing Centers, End Stage Renal Disease Facilities, Chemical Dependency Facilities, Free Standing Emergency Medical Facilities and Drug Abuse Treatment Facilities).</p> <p>A.1.2 Health Registries, Information, and Vital Records <u>Health Data and Analysis</u></p> <p>019 Vital Statistics</p> <p><i>Updated fiscal years. Leveled amounts between fiscal years. Updated strategies for LBB approved budget structure.</i></p>		
16	II-62	<p>Revolving Fund Services: Canteen Services and Sheltered Workshops. Out of funds appropriated above in Strategy C.1.3, Mental Health State Hospitals, \$795,500 per fiscal year in General Revenue shall be allocated for the operation of canteen and sheltered workshops. The department shall provide information on related revenues, balances, contracts and profits to the Legislative Budget Board, Governor and Comptroller of Public Accounts. These revenues, expenditures and balances shall be reported and included in agency Operating Budgets, Legislative Appropriation Requests, and Annual Financial Reports. The timetable, format and content for additional monthly reports related to canteen operations and sheltered workshops shall be prescribed by the Legislative Budget Board.</p>		
17	II-62	<p>Prohibition on Abortions.</p> <p>a. It is the intent of the Legislature that no funds shall be used to pay the direct or indirect costs (including overhead, rent, phones and utilities) of abortion procedures provided by contractors of the department.</p> <p>b. It is also the intent of the legislature that no funds appropriated under Strategy B.1.3, Family Planning Services, shall be distributed to individuals or entities that perform elective abortion procedures or that contract with or provide funds to</p>		

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
		<p>individuals or entities for the performance of elective abortion procedures.</p> <p>c. The department shall include in its financial audit a review of the use of appropriated funds to ensure compliance with this section.</p>		
18	II-62	<p>Family Planning. Of funds appropriated under Strategy B.1.3, Family Planning Services, no state funds may be used to dispense prescription drugs to minors without parental consent.</p>		
19	II-62	<p>Reporting of Child Abuse. The Department of State Health Services may distribute or provide appropriated funds only to recipients who show good faith efforts to comply with all child abuse reporting guidelines and requirements set forth in Chapter 261 of the Texas Family Code.</p>		
20	II-62	<p>Trauma Formula Distribution. It is the intent of the Legislature that the Department of State Health Services allocate monies from the emergency medical services and trauma care system fund in accordance with all applicable laws including Health and Safety Code, §773.122(c) and §780.004(d). It is further the intent of the Legislature that the Department of State Health Services weight the statutory criteria in such fashion that, in so far as possible, 40 percent of the funds are allocated to urban counties and 60 percent of the funds are allocated to rural and frontier counties.</p>		
21	II-63	<p>Authorization to Receive, Administer, and Disburse Federal Funds. The appropriations made herein may be used to match Federal Funds granted to the state for the payment of personal services and other necessary expenses in connection with the administration and operation of a state program of health services. Notwithstanding the General Provisions of this Act, the Executive Commissioner of Health and Human Services, the Commissioner of State Health Services, or the designee under statute or by rule is hereby authorized to receive and disburse in accordance with plans acceptable to the responsible federal agency, all federal monies that are made available (including grants, allotments, and reimbursements) to the state and retain their character as Federal Funds for such purposes, and to receive, administer, and disburse Federal Funds for federal regional programs in accordance with plans agreed upon by the Department of State Health Services and the responsible federal agency, and such other activities as come under the authority of the Executive Commissioner of Health and Human Services, the Commissioner of State Health Services, or the designee under statute or by rule, and such monies are hereby appropriated to the specific purpose or purposes for which they are granted or otherwise made available. Earned Federal Funds are not considered to be Federal Funds for the purpose of this section.</p>		

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
22	II-63	<p>Accounting of Support Costs. The Comptroller of Public Accounts shall establish separate accounts from which certain support costs shall be paid. The Department of State Health Services is hereby authorized to make transfers into these separate accounts from line item strategies in order to pay for these expenses in an efficient and effective manner. Only costs not directly attributable to a single program may be budgeted in or paid from these accounts. Items to be budgeted in and paid from these accounts include but are not limited to: postage, occupancy costs, equipment repair, telephones, office printing costs, supplies, freight and transport costs, telephone system costs and salary and travel costs of staff whose function supports several programs. The department shall be responsible for quarterly allocations of these costs to the original strategies.</p>		
23	II-63	<p>Medical Treatment. The Department of State Health Services may distribute funds for medical, dental, psychological, or surgical treatment provided to a minor only if consent to treatment is obtained pursuant to Chapter 32 of the Texas Family Code or other state law. In the event that compliance with this rider would result in the loss of Federal Funds to the state, the department may modify, or suspend this rider to the extent necessary to prevent such loss of funds, provided that 45-day prior notification is provided to the Governor and the Legislative Budget Board.</p>		
24	II-63	<p>Appropriation: WIC (Special Supplemental Nutrition Program for Women, Infants, and Children) Rebates. The Department of State Health Services (DSHS) is authorized to receive and expend WIC rebates and interest earnings associated with WIC rebates and such funds are appropriated to DSHS. The department shall only expend WIC rebates and interest earnings for the purposes of the WIC program.</p>		
25	II-63	<p>State Health Care Facility Provisions. The State Health Care Facilities operated by the Department of State Health Services are the Rio Grande State Center Outpatient Clinic (formerly known as the South Texas Health Care System) and the Texas Center for Infectious Disease. The provisions applying to the State Health Care Facilities are as follows:</p> <ul style="list-style-type: none"> a. The Texas Center for Infectious Disease shall provide utilities and inpatient treatment and care services to the San Antonio State Hospital and the San Antonio State School without reimbursement. b. Out of the funds appropriated above, the Rio Grande State Center Outpatient Clinic shall support medical education through the South Texas Family Practice Residency Program-McAllen with the cooperation of the University of Texas Health Science Center at San Antonio. c. Third party collections (appropriated receipts) collected by the Department of State Health Services State Health Care 		

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
		Facilities are hereby appropriated to Strategy C.1.1, Texas Center for Infectious Disease, and Strategy C.1.2, Rio Grande State Center Outpatient Clinic, for the provision of services. The Texas Center for Infectious Disease shall provide utilities and inpatient treatment and care services to the San Antonio State Hospital and the San Antonio State School without reimbursement.		
26	II-64	Immunization of Employees. Monies appropriated above may be expended for any immunization which is required of employees at risk in the performance of their duties.		
27	II-64	<p>Reimbursement of Advisory Committee Members. Pursuant to Government Code §2110.004, or the statute authorizing the specific committee for those committees not subject to Government Code §2110.004, reimbursement of expenses for advisory committee members, out of funds appropriated above not to exceed \$200,000 per fiscal year, is limited to the following advisory committees: State Preventive Health Advisory Committee, Texas Radiation Advisory Board, Preparedness Coordinating Council, Governor's Emergency Medical Services and Trauma Advisory Council, and Local Authority Network Advisory Committee.</p> <p>Pursuant to Government Code §2110.004, or the statute authorizing the specific committee for those committees not subject to Government Code §2110.004, reimbursement of expenses for advisory committee members, out of funds appropriated above, is limited to any advisory committee member who represents either the general public or consumer on the following advisory committees: Texas HIV Medication Program Advisory Committee, Registered Sanitarian Advisory Committee, Code Enforcement Officer's Advisory Committee, Promotora Community Health Worker Training and Certification Committee, Medical Radiological Technologist Advisory Committee, Respiratory Care Practitioner's Advisory Committee, Drug Demand Reduction Advisory Committee, Texas State Perfusionist Advisory Committee, Youth Camp Advisory Committee, Dyslexia Practitioners Licensing Advisory Committee, Worksite Wellness Advisory Board, Texas Medical Child Abuse Resources and Education System Advisory Committee, the Advisory Panel on Health Care Associated Infections, Public Health Funding and Policy Committee, and School Health Advisory Committee.</p> <p>Pursuant to Government Code, §2110.004, reimbursement of expenses for advisory committee members, out of funds appropriated above not to exceed \$21,978 per year, is limited to the Council for Advising and Planning for the Prevention and Treatment of Mental and Substance Abuse Disorders.</p> <p>To the maximum extent possible, the department shall encourage the use of videoconferencing and teleconferencing and shall</p>		

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
		<p>schedule meetings and locations to facilitate the travel of participants so that they may return the same day and reduce the need to reimburse members for overnight stays.</p> <p><i>Corrected name for the Texas HIV Medication Advisory Committee. Medical Radiological Technologist Advisory Committee, and Respiratory Care Practitioner's Advisory Committee Advisory deleted due to expiration of statutory requirement. While the exact name is not specified in statute, it is identified in rule by 25 TAC 140.579 as the Dyslexia Licensing Advisory Committee.</i></p>		
28	II-64	<p>Reimbursement of Advisory Council Members. Pursuant to Health and Safety Code, §1001.027, reimbursement of travel expenses for the State Health Services Advisory Council members, out of funds appropriated above, is hereby authorized such that the sum total of all reimbursements for members of the Council shall not exceed \$25,000 per fiscal year, at the rate specified in the general provisions of this Act.</p>		
29	II-64	<p>Unexpended Balances - Preparedness and Prevention, and Consumer Protection Services. All unexpended balances, including General Revenue and All Funds, not otherwise restricted from appropriations to Goal A, Preparedness and Prevention Services, and Goal D, Consumer Protection Services, at the close of the fiscal year ending August 31, 2014<u>2016</u>, are hereby appropriated for the fiscal year beginning September 1, 2014<u>2016</u> only upon prior written approval by the Legislative Budget Board and Governor.</p> <p>For authorization to expend the funds, the agency shall submit a written request to the Legislative Budget Board and the Governor by August 1, 2014<u>2016</u>. At the same time, the agency shall provide a copy of the request to the Comptroller of Public Accounts. The request must be organized by fiscal year as follows:</p> <p>a. The following information shall be provided for the fiscal year with an unexpended balance:</p> <ol style="list-style-type: none"> (1) an explanation of the causes of the unexpended balance(s); (2) the amount of the unexpended balance(s) by strategy; and (3) an estimate of performance levels and, where relevant, a comparison to targets in this Act. 		

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
		<p>b. The following information shall be provided for the fiscal year receiving the funds:</p> <ul style="list-style-type: none"> (1) an explanation of purpose for which the unexpended balance(s) will be used and whether the expenditure will be one-time or ongoing; (2) the amount of the expenditure by strategy; (3) an estimate of performance levels, and where relevant, a comparison to targets in this Act; and (4) the capital budget impact. <p>The request shall be considered to be approved unless the Legislative Budget Board and the Governor issue written disapprovals within 30 business days of the date on which the staff of the Legislative Budget Board concludes its review of the proposal to transfer the funds and forwards its review to the Chair of the House Appropriations Committee, Chair of the Senate Finance Committee, Speaker of the House, and Lieutenant Governor.</p> <p>The Comptroller of Public Accounts shall not allow the use of unexpended balances authorized by any of the above subsections if the Legislative Budget Board provides notification to the Comptroller of Public Accounts that the requirements of this provision have not been satisfied.</p> <p><i>Updated fiscal years.</i></p>		
30	II-65	<p>State Health Programs Drug Manufacturer Rebates. The Department of State Health Services is authorized to receive and expend drug rebates and interest earnings associated with Kidney Health Care (KHC) drug rebates and Children with Special Health Care Needs (CSHCN) drug rebates. The department shall expend the drug rebates and interest earnings, appropriated above, only for the purpose of client services for the KHC and CSHCN programs.</p>		
31	II-65	<p>Performance of Licensing Entities. The Department of State Health Services (DSHS) shall provide performance information to the Legislative Budget Board and the Governor no later than December 1 of each year for each board or other entity that licenses, certifies, or registers health professionals attached to or within the purview of DSHS. For each board or other entity, the department shall provide the following for the previous fiscal year:</p>		

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
		<p>a. Number of Professionals Licensed/Certified/Placed on a Registry;</p> <p>b. Number of New License/Certificate Applications Received;</p> <p>c. Total Number of Complaints Received;</p> <p>d. Total Number of Jurisdictional Complaints Resolved; and</p> <p>e. Total Number and Type of Disciplinary Actions Taken.</p> <p><i>Previously requested deletion in 83rd as duplicative of Performance Measures. Pursuant to Special Provision Sec. 51, DSHS requested to eliminate this reporting requirement on November 2, 2011 due to the inclusion of this information in the reporting requirements of SB 1058. Permission was granted by the LBB on February 16, 2012 for the 2012-13 biennium. The difference between rider 31 and SB 1058 is a, c, d, and e are included, but b is missing from SB 1058. Perhaps including b in the Performance Measures would permit deletion of this rider.</i></p>		
32	II-65	<p>Performance Reporting for Texas Center for Infectious Disease and Rio Grande State Center. The Department of State Health Services shall submit to the Legislative Budget Board and the Governor the following information on an annual basis regarding hospital performance: revenue collections at the hospital, by payer mix; direct and non-direct patient care expenditures; number of inpatient patients served on a monthly basis, by type of service provided; and number of outpatient patients served on a monthly basis, by type of service provided.</p>		
33	II-65	<p>Notification of Regional Funds Distribution. The Department of State Health Services shall notify the Legislative Budget Board and the Governor of the allocation methodology or formula used to allocate funds and provide an impact analysis of any changes from the previous year's formula or percentage allocations, by public health region, at least 30 days prior to allocations made out of funds appropriated above in Strategy B.1.2, Women and Children's Health Services.</p>		
34	II-65	<p>State Owned Multicategorical Teaching Hospital Account.</p> <p>a. Out of funds appropriated above in Strategy B.3.3, Indigent Health Care Reimbursement <u>University of Texas Medical</u></p>		

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
		<p><u>Branch at Galveston (UTMB)</u>, from the State Owned Multicategorical Teaching Hospital Account No. 5049 ("Account"), and contingent upon \$9,809,765 being collected and deposited in the Account for the 2014-152016-17 biennium, the amount of \$9,809,765 is allocated to the Department of State Health Services (DSHS) for reimbursement to the University of Texas Medical Branch at Galveston (UTMB) for the provision of health care services provided to indigent patients according to the terms set out in subsection (b). Any additional unexpended balances on hand in the accounts as of August 31, 20142016 are appropriated to the agency for the fiscal year beginning September 1, 20142016 for the same purpose, subject to the department notifying the Legislative Budget Board and the Governor in writing at least 30 days prior to budgeting and expending these balances.</p> <p>b. Funds in the account may be used to reimburse UTMB for the provision of health care services provided to indigent patients from all counties, except that it may be used for indigent patients from Galveston, Brazoria, Harris, Montgomery, Fort Bend, and Jefferson counties only if those counties' County Indigent Health Care income eligibility levels, or those counties' hospital district income eligibility levels, exceed the statutory minimum set for the County Indigent Health Care Program.</p> <p>c. Upon presentation of information supporting UTMB's claim, DSHS shall reimburse UTMB for the health care services provided to indigent patients from the Account established for this purpose. The reimbursement from the Account shall be based upon a rate equal to 90 percent of the Medicaid fee-for-service rate in effect at the time of service for UTMB. This reimbursement shall be made monthly upon the submission to DSHS of a statement of the care provided by UTMB to indigent patients, according to the terms set out in subsection (b). UTMB is authorized to charge patient co-payment amounts for providing health care services, however, UTMB is not entitled to reimbursement from the Account for these copayment amounts. The Office of the State Auditor may periodically review the statements submitted to DSHS for reimbursement from the Account, as well as the disbursement therefrom, to verify compliance with the criteria established herein.</p> <p><i>Updated fiscal years. Identified applicable abbreviation.</i></p>		
35	II-66	<p>Informational Listing - Permanent Funds and Endowments. The following is an informational list of the amounts used to capitalize Permanent Funds and Endowments created by House Bill 1676, Seventy-sixth Legislature, and does not make appropriations.</p>		

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
		Permanent Fund for Children and Public Health	\$ 100,000,000	
		Permanent Fund for Health and Tobacco Education and Enforcement	\$ 200,000,000	
		Permanent Fund for Emergency Medical Services and Trauma Care	\$ 100,000,000	
		Permanent Hospital Fund for Capital Improvements and the Texas Center for Infectious Disease	\$ 25,000,000	
36	II-66	<p>Estimated Appropriation and Unexpended Balance: Permanent Tobacco Funds. The estimated amounts appropriated above out of the Permanent Fund for Health and Tobacco Education and Enforcement, Permanent Fund for Children and Public Health, the Permanent Fund for Emergency Medical Services and Trauma Care, and the Permanent Hospital Fund for Capital Improvements and the Texas Center for Infectious Disease are out of the available earnings of the funds. Available earnings in excess of the amounts estimated above are appropriated to the Department of State Health Services. In the event that amounts available for distribution or investment returns are less than the amounts estimated above, this Act may not be construed as appropriating funds to make up the difference. Any additional unexpended balances on hand in the accounts as of August 31, 2014<u>2016</u> are appropriated to the agency for the fiscal year beginning September 1, 2014<u>2016</u> for the same purposes, subject to the department notifying the Legislative Budget Board and the Governor in writing at least 30 days prior to budgeting and expending these balances.</p> <p><i>Updated fiscal years.</i></p>		
37	II-66	<p>Administration of Public Health Funds. Funds are appropriated above out of the Permanent Fund for Children and Public Health, the Permanent Fund for Emergency Medical Services and Trauma Care, and the Permanent Hospital Fund for Capital Improvements and the Texas Center for Infectious Disease for the purpose of implementing Government Code §§403.105, 403.1055, 403.106, and 403.1066. In no event may the administrative costs to implement the provisions of the statute exceed 3 percent. Grants and program costs must compose at least 97 percent of the expenditures to implement the provisions of the statute.</p>		
38	II-66	<p>Transfer for Health Professions Council. Out of funds appropriated above in Strategy D.1.4, Health Care Professionals, an amount equal to \$13,517 in fiscal year 2014<u>2016</u> and \$13,517 in fiscal year 2015<u>2017</u> shall be used for transfer to, and expenditure by, the Health Professions Council as the pro-rated assessment of the Professional</p>		

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
		Licensing and Certification Unit of the Department of State Health Services. <i>Updated fiscal years.</i>		
39	II-67	<p>Children with Special Health Care Needs.</p> <p>a. Amounts appropriated above to DSHS in Strategy A.3.4, <u>A.3.5</u>, Children with Special Health Care Needs, may only be transferred if such a transfer would not result in a loss of, or reduction in, services or a loss of, or reduction in, persons otherwise eligible for CSHCN services or that results in higher cost projections for the next fiscal biennium.</p> <p>b. DSHS may exceed the performance measure targets identified above for the <u>Average Monthly Caseload</u> Number of CSHCN Clients Receiving Health Care Benefits <u>Medical Services</u> to the extent funding is available to do so.</p> <p>c. DSHS is directed to maintain provider reimbursement rates for Title V providers that mirror reductions in provider reimbursement rates for Medicaid providers. <u>Title V rates below Medicaid rates would require no additional reductions.</u></p> <p>d. DSHS shall submit to the Legislative Budget Board and the Governor the following information on an annual basis (no later than December 1 of each fiscal year) regarding the demographics of the clients served by this program, including income levels, insured status and citizenship.</p> <p>e. DSHS shall submit to the Legislative Budget Board and the Governor, at the end of each fiscal quarter, caseload and prescription drug data, and related expenditure data specific to:</p> <ol style="list-style-type: none"> (1) Forecast projections for the 36 month period beginning with the first month after the report is due; and (2) Expenditure amounts for at least the preceding 36 months. <p>The data shall be submitted in a format specified by the Legislative Budget Board.</p> <p><i>Updated strategy for LBB approved budget structure.</i></p>		

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
		<p><i>b. Change to be consistent with the updated performance measure (1.3.5.OP.2) title.</i></p> <p><i>c. The Children with Special Health Care Needs Services Program strives to follow Medicaid rates; however, to remain within budgetary limitations, some rates are already lower than Medicaid rates. At times, this rider imposes further reductions to provider reimbursement that is already lower than Medicaid.</i></p>		
40	II-67	<p>Nuisance Surveys for the Economically Disadvantaged Communities Program. The Texas Commission on Environmental Quality (TCEQ) and the Water Development Board (WDB) shall reimburse the Department of State Health Services (DSHS) for costs incurred by the agency in conducting nuisance surveys for applicants for financial assistance through the Economically Disadvantaged Communities program administered by the Water Development Board. TCEQ and WDB shall each reimburse such costs through Interagency Contracts with DSHS in an amount not to exceed a total of \$125,000 per agency for the biennium beginning on September 1, 2013<u>2015</u>.</p> <p><i>Updated fiscal years.</i></p>		
41	II-67	<p>Medically Fragile Children. It is the intent of the Legislature that the Department of State Health Services provides appropriate General Revenue funding in fiscal years 2014<u>2016</u> and 2015<u>2017</u> in Strategy A.3.4, <u>A.3.5</u>, Children with Special Health Care Needs, for programs specifically designed for medically fragile children, the most critical of the children with special health care needs.</p> <p><i>Updated fiscal years. Updated strategy for LBB approved budget structure.</i></p>		
42	II-67	<p>Appropriation: Contingent Revenue. The Department of State Health Services (DSHS) is appropriated for the purposes identified below any additional revenue generated by DSHS above the amounts identified in fiscal year 2014<u>2016</u> or fiscal year 2015<u>2017</u> in the Comptroller of Public Account's Biennial Revenue Estimate (BRE) for each of the accounts or revenue objects identified below. An appropriation from an account or revenue object shall be made available to the department once certified by a Comptroller's finding of fact that the amount in the BRE for the account or revenue object for the given fiscal year has been exceeded. An appropriation is limited to revenue generated in fiscal year 2014<u>2016</u> or fiscal year 2015<u>2017</u> and does not include any balances that have accrued in the account or revenue object code.</p> <p>By March 1st each year, DSHS may notify the Comptroller of Public Accounts, the Legislative Budget Board, and the</p>		

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
		<p>Governor of the amount that the department projects will be received in excess of the amounts contained in the BRE for each of the department's accounts listed below, along with sufficient information to reflect how the estimate was determined. If the Comptroller finds the information sufficient to support the projection of additional revenue, a finding of fact to that effect shall be issued to reflect the additional revenue available for each account.</p> <ul style="list-style-type: none"> a. Account No. 341, Food and Drug Retail Fees, for restaurant inspections. b. Account No. 524, Public Health Services Fee, excluding any amounts deposited into Revenue Object 3561, which are statutorily dedicated for laboratory debt service. Any additional revenues are appropriated for laboratory operations. c. Revenue Object 3175, Account No. 5017, Asbestos Removal Licensure, for asbestos inspections and regulatory activities. d. Account No. 5021, Certification of Mammography Systems, for the purpose of certification of mammography facilities. e. Revenue Objects 3616, 3560, and 3562 in the General Revenue Fund for the purpose of regulating health professionals. f. Account No. 5024, Food and Drug Registration Fees, for food and drug inspections. g. Account No. 5022, Oyster Sales, for oyster plant inspections. h. Revenue Object 3589 in the General Revenue Fund for Radiation Control regulatory activities. i. Revenue Objects 3123, 3141, 3175, 3555, and 3573 in the General Revenue Fund for environmental regulation. j. Account No. 19, Vital Statistics, for processing birth and death certificates and other vital records. k. Account No. 512, Bureau of Emergency Management, for licensing Emergency Medical Services personnel and providers. l. Account No. 129, Hospital Licensing, for regulating health care facilities. <p><i>Updated fiscal years.</i></p>		

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
43	II-68	<p>Mentally Ill Offender Screening. Pursuant to Health and Safety Code §§614.013 and 614.017, the Department of State Health Services and local mental health or mental retardation authorities shall, through a memorandum of understanding, identify offenders with mental impairments in the criminal justice system, collect and report prevalence data, and accept and disclose information relating to a special needs offender if the disclosure serves the purpose of Chapter 614, Health and Safety Code.</p> <p>The Department shall report to the Legislative Budget Board no later than September 1 of each fiscal year its efforts to facilitate the exchange of information between agencies pursuant to Health and Safety Code §614.017. The report shall include, but is not limited to: the manner in which information is exchanged between agencies, the frequency with which information is exchanged, the type of information most frequently exchanged, and the agencies most frequently involved in the exchange of information.</p>		
44	II-68	<p>Texas.Gov Authority Appropriation.</p> <ul style="list-style-type: none"> a. The Department of State Health Services (DSHS) is authorized in accordance with § 2054.252 of the Government Code to increase the occupational license, permit, and registration fees imposed on licensees by an amount sufficient to cover the cost of the subscription fee charged by the Texas.Gov Authority. b. Amounts appropriated above to DSHS include \$1,146,140 in fiscal year 2014<u>2016</u> and \$1,146,140 in fiscal year 2015<u>2017</u> in fee revenue in Strategy D.1.6, Texas.Gov, for the purpose of paying Texas.Gov Authority subscription fees. c. In the event that actual and/or projected revenue collections from fee increases to cover the cost of Texas.Gov subscription fees are insufficient to offset the costs identified above, the Comptroller is hereby directed to reduce the appropriation authority provided by this Act to DSHS to be within the amount of fee revenue expected to be available. d. For new licensing applications, DSHS is hereby appropriated the additional revenue generated from occupational license, permit, or registration fees in excess of the Comptroller's biennial revenue estimate for 2012-13<u>2016-17</u> for the sole purpose of payment to the Texas.Gov Authority contractor of subscription fees for implementing and maintaining electronic services for the department. DSHS, upon completion of necessary actions to access or increase fees, shall furnish an annual schedule of the number of license issuances or renewals and associated annual fee total, and any other supporting documentation to the Comptroller. If the Comptroller finds the information sufficient to support the projection of increased revenues, a notification letter will be issued and the contingent appropriation made available for the intended 		

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
		<p>purposes.</p> <p>e. DSHS shall notify the Legislative Budget Board and the Comptroller of Public Accounts in writing upon receiving an exemption from participating in Texas.Gov. Within 45 days of receiving an exemption, the department shall provide the Legislative Budget Board and the Comptroller with a report of the effective date, the reason for exemption, and all estimated expenditures for Texas.Gov costs in the fiscal year in which the exemption is made.</p> <p><i>Updated fiscal years.</i></p>		
45	II-69	<p>School Cafeteria Inspections. Amounts appropriated above to the Department of State Health Services include fee revenue (General Revenue) estimated to be \$350,000 in fiscal year 2014<u>2016</u> and \$350,000 in fiscal year 2015<u>2017</u> from school districts for the purpose of conducting inspections of school cafeterias to achieve compliance with federal regulations issued pursuant to Section 111(2)(A) of Public Law 108-265, 118 Stat. 747 (Child Nutrition and WIC Reauthorization Act of 2004).</p> <p><i>Updated fiscal years.</i></p>		
46	II-69	<p>Estimated Appropriations: Perpetual Care Account. In the event of an incident involving the release of or abandonment of radioactive material and/or contaminated facilities in Texas under the jurisdiction of the Texas Department of State Health Services (DSHS) or the abandonment of mammography films by a facility registered by the DSHS, DSHS is hereby appropriated any revenues from the DSHS licensees, including the proceeds of securities and interest earned, deposited to the credit of the Perpetual Care Account pursuant to Health and Safety Code, §401.305 (b) and §401.301 (d) during the biennium beginning September 1, 2013<u>2015</u> (estimated to be \$1,715,210). Any additional unexpended balance on hand in the account as of August 31, 2013<u>2016</u> is appropriated to the agency for the fiscal year beginning September 1, 2013<u>2016</u> for the same purpose, subject to the department notifying the Legislative Budget Board and the Governor in writing at least 30 days prior to budgeting and expending these balances.</p> <p>The funds shall be used in Strategy D.1.3, Radiation Control, to mitigate radioactive contamination or abandoned radioactive sources resulting from activities of a DSHS licensee or unlicensed entity or a mammography registrant as provided in the Health and Safety Code, §401.305 (c) - (d), and pursuant to a memorandum of understanding with the DSHS relating to the regulations for the control of radiation as applicable.</p>		

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
		<i>Updated fiscal years.</i>		
47	II-69	<p>Unexpended Balances - Community Mental Health Crisis Services. Any unexpended balances remaining at August 31, 2014<u>2016</u> in Strategy B.2.3, Community Mental Health Crisis Services, are hereby appropriated for the same purposes in fiscal year 2015<u>2017</u>.</p> <p>For authorization to expend the funds, the agency shall submit a written request to the Legislative Budget Board and the Governor. At the same time, the agency shall provide a copy of the request to the Comptroller of Public Accounts The request must be organized by fiscal year as follows:</p> <p>a. The following information shall be provided for the fiscal year with an unexpended balance:</p> <ul style="list-style-type: none"> (1) an explanation of the causes of the unexpended balance(s); (2) the amount of the unexpended balance(s) by strategy; and (3) the associated incremental change in service levels compared to performance targets in this Act for that fiscal year. <p>b. The following information shall be provided for the fiscal year receiving the funds:</p> <ul style="list-style-type: none"> (1) an explanation of purpose for which the unexpended balance(s) will be used and whether the expenditure will be one-time or ongoing; (2) the amount of the expenditure by strategy; (3) the incremental change in service levels compared to performance targets in this Act for that fiscal year; and (4) the capital budget impact. <p>The request shall be considered to be approved unless the Legislative Budget Board or the Governor issues a written disapproval within 15 business days of the date on which the staff of the Legislative Budget Board concludes its review of</p>		

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
		<p>the proposal to expend the funds and forwards its review to the Chair of the House Appropriations Committee, Chair of the Senate Finance Committee, Speaker of the House, and Lieutenant Governor.</p> <p>The Comptroller of Public Accounts shall not allow the use of unexpended balances authorized by any of the above subsections if the Legislative Budget Board provides notification to the Comptroller of Public Accounts that the requirements of this provision have not been satisfied.</p> <p><i>Updated fiscal years.</i></p>		
48	II-70	<p>County Indigent Health Care. The Department of State Health Services may not allocate more than 10 percent of the total funds appropriated for the County Indigent Health Care program strategy to any single county. The total distribution of funds to any county may exceed the 10 percent allocation limit if there are no counties below the limit eligible for additional funding.</p>		
49	II-70	<p>Revolving Account for the Consolidated Health and Human Services Print Shop. It is the intent of the Legislature that the Department of State Health Services establish and maintain the "Revolving Account for the Consolidated Health and Human Services Print Shop" to account for the expenditures, revenues, and balances of managing a full-cost recovery Consolidated Print Shop. The expenditures, revenues, and balances included above for this operation shall be maintained separately by the Department of State Health Services within its accounting system. These funds can only be used for the purpose of managing the consolidated print shop. For the purpose of meeting cash flow needs, the Department of State Health Services may temporarily transfer funds from Strategy E.1.3, Other Support Services, to the revolving account. Transfers must be returned by the end of the fiscal year.</p> <p><u>The Department of State Health Services is hereby authorized to transfer all unexpended balances forward from E.1.3, Other Support Services, to the following fiscal year, and any unexpended balances that exist at the end of a fiscal year are appropriated for use during the following fiscal year for the same purpose.</u></p> <p><i>The ability to UB funds allows DSHS to respond timely to issues that cross years within the biennium, providing more latitude in managing funds appropriated to the agency.</i></p>		
50	II-70	<p>Family Planning Affiliate Requirements. An entity otherwise eligible to receive funds distributed under Strategy B.1.3,</p>		

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
		<p>Family Planning Services, (the "family-planning affiliate") will not be disqualified from receipt of such funds because of its affiliation with an entity that performs elective abortions (the "abortion-services affiliate") provided that such affiliation satisfies the following requirements:</p> <ul style="list-style-type: none"> a. Legal separation. The family-planning and abortion-services affiliates must be legally separate corporations, with separate articles of incorporation and separate bylaws. State or local governmental entities that are family-planning and abortion-services affiliates must be legally separate organizations and must have separate governing structures. b. Easily distinguishable names. The family-planning and abortion-services affiliates must have easily distinguishable names. c. Separate boards of directors and governing bodies. The family-planning and abortion-services affiliates must have separate boards of directors or governing bodies which meet separately and maintain separate records. d. No direct or indirect subsidy. The family-planning affiliate may not transfer any funds distributed under Strategy B.1.3, Family Planning Services, to its abortion-services affiliate. The affiliated entities must apportion fair value for any shared expenses or costs (including overhead, rent, phones, equipment, and utilities) in accordance with generally accepted accounting principles. e. Detailed employee timekeeping. Any person employed part-time by the family-planning affiliate or part-time by the abortion-service affiliate must maintain detailed time records clearly reflecting the work performed for each affiliate. f. Clear signage. If the family-planning and abortion-services affiliates are located at the same physical location, the existence and separate nature of the affiliate relationship must be clearly reflected by appropriate signage in areas accessible to the public. g. Separate books. The family-planning and abortion-services affiliates must each maintain records adequate to show compliance with these requirements. <p>Annual audit of family planning services providers. At least once every two years, the Executive Commissioner of the Health and Human Services Commission or his agent shall conduct an audit of each family planning affiliate to determine if the affiliate and the Department of State Health Services have complied with this requirement. The Executive Commissioner</p>		

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
		<p>of the Health and Human Services Commission shall make the audits available to the Governor, the Lieutenant Governor, the Speaker of the Texas House of Representatives, and the members of the State Legislature.</p> <p>No later than June 30 of each year, the Executive Commissioner of the Health and Human Services Commission shall submit a report to the Chairman of the Senate Finance Committee and to the Chairman of the House Appropriations Committee regarding the audits filed or conducted pursuant to this section, including the number and findings of such audits, the adequacy of the documentation submitted, and any recommendations to revise the verification process.</p>		
51	II-71	<p>Pandemic Flu Preparedness. Using funds appropriated to the agencies elsewhere under this Act, the Department of State Health Services in conjunction with the Texas Division of Emergency Management in the Department of Public Safety shall identify and seek any necessary approvals for federal or other funds available for the purchase of antivirals for pandemic flu preparedness as the existing state stockpile requires rotation and/or disposal when expired.</p> <p><i>Delete. Texas may rely on the national stockpile in a pandemic flu emergency, as the storage, disposal and transport costs are challenging to justify given future anticipated funding reductions.</i></p>		
52	II-71	<p>Exemption from Article IX, Sec. 8.03 (e), Reimbursements and Payments. The Department of State Health Services is hereby exempted from the provisions contained in Article IX, Sec. 8.03(e), Reimbursements and Payments, of the General Appropriations Act for the 2014-15<u>2016-17</u> biennium.</p> <p><i>Updated fiscal years.</i></p>		
53	II-71	<p>Limitation: Expenditure and Transfer of Additional Public Health Medicaid Reimbursements.</p> <p>a. Appropriations. Included in the amounts appropriated above for the Department of State Health Services (DSHS) are the following amounts of Public Health Medicaid Reimbursements (Account 709), which includes an anticipated transfer in the amount of \$11,699,945 <u>12,415,200</u> in fiscal year 2014<u>2016</u> and \$11,688,315 <u>12,435,553</u> in fiscal year 2015<u>2017</u> to the Health and Human Services Commission:</p> <p>(1) Strategy A.2.1, Immunize Children and Adults in Texas: \$341,686 in each fiscal year;</p>		

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
<p>(2) Strategy A.4.1, Laboratory Services: \$32,006,118 in each fiscal year;</p> <p>(3) Strategy C.1.3, Mental Health State Hospitals: \$53,964,586 <u>50,243,886</u> in each fiscal year (funding represents all additional Account 709 revenue anticipated to be available in the 2014-15 <u>2016-17</u> biennium (\$107,929,172 <u>\$100,487,772</u>); the additional revenue is associated with an anticipated increase in laboratory fee revenue due to a rate change to align with Medicare rates);</p> <p>(4) Strategy C.2.1, Mental Health Community Hospitals: \$6,400,000 <u>10,120,700</u> in each fiscal year; and</p> <p>(5) Strategy E.1.1, Central Administration: \$672,285 in each fiscal year.</p> <p>b. Limitation on Use of Public Health Medicaid Reimbursements (Account 709).</p> <p>(1) In the event that Public Health Medicaid Reimbursement revenues exceed the amounts noted above, the department may spend the Public Health Medicaid Reimbursement funds thereby made available upon prior written notification of the Legislative Budget Board and the Governor.</p> <p>(2) Notwithstanding any other provisions contained in this Act, transfers of Public Health Medicaid Reimbursement revenues maybe made upon prior written notification of the Legislative Budget Board and the Governor.</p> <p>c. Notification of Use of Additional Public Health Medicaid Reimbursements Funds. The notification shall include the following information:</p> <p>(1) the reason for and the amount of Public Health Medicaid Reimbursement revenue that exceeds the amounts noted in section (a) above, and whether this additional revenue will continue in future years;</p> <p>(2) the reason for and the amount of any transfer of Public Health Medicaid Reimbursement revenue;</p> <p>(3) a detailed explanation of the purpose(s) of the expenditure and whether the expenditure will be one-time or ongoing;</p> <p>(4) the name of the strategy or strategies affected by the expenditure and the FTEs for each strategy by fiscal year;</p>				

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
		<p>(5) the impact of the expenditure on performance levels and, where relevant, a comparison to targets included in this Act for the affected strategy or strategies; and</p> <p>(6) the impact of the expenditure on the capital budget.</p> <p><i>Updated fiscal years. Amounts need to be changed based on the new FMAP.</i></p>		
54	II-72	<p>Use of Appropriated Funds for Reports on School-based Health Centers. Money appropriated to the Department of State Health Services may be used by the department to prepare and submit a report to the legislature regarding school-based health centers only if the report:</p> <ul style="list-style-type: none"> a. is submitted not more frequently than once every two years; b. is limited to information relating to school-based health centers that receive funding from the department; and c. contains only information that the department determines may be provided: <ul style="list-style-type: none"> (1) in compliance with federal law regarding confidentiality of medical information; and (2) without imposing excessive reporting requirements on school districts. 		
55	II-72	<p>Synar Results Notification for Local Communities. Out of funds appropriated above in Strategy B-2.6<u>A.3.2</u>, Reduce Use of Tobacco Products, the Department of State Health Services or the contracted vendor conducting the federally-required Synar survey shall notify the applicable Comptroller of Public Accounts tobacco law enforcement grantee and the applicable local sheriff's department in writing when a Synar violation occurs during the administration of the annual federal Synar survey. The notification shall include a copy of the Synar survey document with documentation of the violation and any additional details of the violation, such as the name of the clerk and actual cigarettes and/or tobacco product sold. Notification shall occur no later than 30 days after the last Synar survey inspection is conducted for the current Synar survey year.</p> <p><i>Updated strategies for LBB approved budget structure.</i></p>		

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
56	II-72	<p>Limitation: Reclassification of General Revenue Associated with Maintenance of Effort. Authority to reclassify Department of State Health Services (DSHS) General Revenue associated with Maintenance of Efforts (MOEs) for the Community Mental Health Services, Maternal and Child Health Services, and Substance Abuse Treatment and Prevention block grants from amounts specified above is contingent upon submission and approval of a written request to the Legislative Budget Board and the Governor. The request shall include the following information:</p> <ul style="list-style-type: none"> a. a detailed explanation of the need for reclassification of the funds; and b. the impact the reclassification will have on current and future MOE requirements. <p>DSHS is also directed to provide annual federal reports associated with the MOEs for the aforementioned block grants to the Legislative Budget Board and the Governor.</p> <p>Further, DSHS shall not take action or inaction to increase the state's MOE requirement for any federal grant without prior approval of the Legislative Budget Board and the Governor.</p>		
57	II-72	<p>Unexpended Balances: General Obligation Bond Proceeds. Included in the amounts appropriated above in Strategy F.1.2, Repair and Renovation: MH Facilities, are unexpended and unobligated balances of general obligation bond proceeds for projects that have been approved under the provisions of Article IX, Section 17.11 of Senate Bill 1, Eighty-first Legislature, Regular Session, 2009, remaining as of August 31, 2013<u>2015</u>, (estimated to be \$0) for the Department of State Health Services for the 2014-15<u>2016-17</u> biennium.</p> <p>All projects funded herein with general obligation bond proceeds are subject to approval by the Legislative Budget Board prior to issuance of the bond proceeds by the Texas Public Finance Authority.</p> <p>Any unexpended balances in general obligation bond proceeds described herein and remaining as of August 31, 2014<u>2016</u>, are hereby appropriated for the same purposes for the fiscal year beginning September 1, 2014<u>2016</u>.</p> <p><i>Updated fiscal years.</i></p>		

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
58	II-73	<p>Behavioral Health Data Collection and Reporting. Out of funds appropriated above in Goal B, Community Health Services, the Department of State Health Services shall improve the measurement, collection, and reporting of outcome data for medically indigent and Medicaid clients who receive publicly-funded behavioral health services according to criteria developed by the Legislative Budget Board. The department shall submit a report on efforts planned or implemented to improve the measurement, collection, and reporting of behavioral health client outcome data to the Legislative Budget Board and the Governor by December 1 of each year of the biennium. The department shall, in consultation with the Health and Human Services Commission, conduct a comparative analysis of publicly funded behavioral health systems in Texas that serve medically indigent persons and Medicaid clients, and submit a report on the study findings to the Legislative Budget Board and the Governor by December 1, 2014.</p> <p><i>Deleted comparative analysis portion of this rider, as the report will be complete and the language will no longer be needed in the 2016-17 biennium.</i></p>		
59	II-73	<p>Food Manufacturers Licensing Report. Beginning September 1, 20132015, the Department of State Health Services (DSHS) shall request a report every six months of the food manufacturers who apply for a Sales Tax License and/or Franchise Tax License from the Comptroller of Public Accounts. DSHS shall reconcile the report with the manufacturers who apply for a Food Manufacturers License from DSHS. DSHS is to investigate the need for licensure of any manufacturer that is on the Comptroller's report and not in the DSHS database.</p> <p><i>Updated fiscal years.</i></p>		
60	II-73	<p>Federally Funded Capital Projects. The Department of State Health Services is authorized to transfer from a non-capital budget item to an existing capital budget item or a new capital budget item not present in the agency's bill pattern contingent upon:</p> <ul style="list-style-type: none"> a. implementation of a new, unanticipated project that is 100 percent federally funded; or b. the unanticipated expansion of an existing project that is 100 percent federally funded; and c. <u>subsequent federal approval at a higher percentage of federal funding than original appropriated as long as no additional state funding is required; and</u> 		

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
		<p>d. notification to the State Auditor's Office and the Comptroller of Public Accounts, and approval from the Legislative Budget Board and Governor.</p> <p>The request shall be considered to be approved unless the Legislative Budget Board or the Governor issue a written disapproval within 30 business days of the date on which the staff of the Legislative Budget Board concludes its review of the proposal to expend the funds and forwards its review to the Chair of the House Appropriations Committee, Chair of the Senate Finance Committee, Speaker of the House, and Lieutenant Governor.</p> <p><i>(c) Add language to allow for changes in federal/state split for federal projects which require varying state match. For instance, potential Advanced Planning Documents are submitted at 50/50 in LAR but Center for Medicaid Services may approve at higher federal funding.</i></p>		
61	II-73	<p>Purchase of Pandemic Flu Vaccines. Out of funds appropriated above, the Department of State Health Services (DSHS) shall examine the latest generation of cell culture-derived pandemic flu vaccine. DSHS is strongly encouraged to consider purchasing the latest generation of cell culture derived pandemic flu vaccine that is available out of state, federal, or other funds.</p>		
62	II-73	<p>Parkland Senior Care Project. It is the intent of the Legislature that a total of \$302,100 for the 2014-15<u>2016-17</u> biennium appropriated in Strategy B.1.4, Community Primary Care Services, be expended exclusively for the Parkland Senior Care Project.</p> <p><i>Updated fiscal years.</i></p>		
63	II-73	<p>Available Earnings from the Permanent Fund for Health and Tobacco Education and Enforcement in Excess of the Biennial Revenue Estimate. In the event that the Comptroller of Public Accounts estimates that the actual and or projected revenue of available earnings, as determined under Government Code §403.1068, of the Permanent Fund for Health and Tobacco Education and Enforcement exceeds the amount projected by 2014-15<u>2016-17</u> Biennial Revenue Estimate as eligible for distribution in a fiscal year in the 2014-15<u>2016-17</u> biennium, the additional revenue is appropriated to the Department of State Health Services for the 2014-15<u>2016-17</u> biennium from the Permanent Fund for Health and Tobacco Education and Enforcement Account No. 5044 for the purposes of supplementing amounts appropriated under Strategy B-2.6</p>		

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
		<p><u>A.3.2</u>, Reduce Use of Tobacco, and supporting programs established under Government Code §403.105(c). This appropriation may not exceed a total of \$20,000,000 for the fiscal biennium and is subject to written certification by the Comptroller's Office that revenue collections for the 2014-15<u>2016-17</u> biennium have or will exceed the Biennial Revenue Estimate.</p> <p><i>Updated fiscal years. Updated strategies for LBB approved budget structure.</i></p>		
64	II-74	<p>Expand Physician Trauma Fellowship Slots. Included in the appropriations above is \$4,500,000 in the 2014-15 biennium out of General Revenue Dedicated Account 5111, Designated Trauma Facility and EMS, for the funding of physician and nursing trauma fellowships.</p> <p><i>Delete. Fund 5111, in the amount of \$4,500,000 for the biennium, was appropriated directly to the Texas Higher Education Board in the FY 2014/2015 biennium. The DSHS appropriation for fund 5111 was reduced by \$4,500,000 for the biennium in FY 2014/2015 biennium.</i></p>		
65	II-74	<p>Family Planning Service. Department of State Health Services shall allocate funds appropriated above in Strategy B.1.3, Family Planning Services using a methodology that prioritizes distribution and reallocation to first award public entities that provide family planning services, including state, county, local community health clinics, Federally Qualified Health Centers, and clinics under the Baylor College of Medicine; secondly, non-public entities that provide comprehensive primary and preventative care as a part of their family planning services; and thirdly, non-public entities that provide family planning services but do not provide comprehensive primary and preventative care. The Department shall in compliance with federal law ensure the distribution and allocation methodology for funds in Strategy B.1.3 does not severely limit or eliminate access to services to any region.</p> <p>Out of funds appropriated above in Strategy B.1.3, Family Planning Services, up to \$1,000,000 per year may be allocated to clinics for core family planning services provided under the auspices of Baylor College of Medicine.</p>		
66	II-74	<p>Outpatient Competency Restoration Pilot Programs. Out of the funds appropriated above in Strategy B.2.3, Community Mental Health Crisis Services, the Department of State Health Services shall allocate out of the General Revenue Fund \$4,000,000 for the state fiscal year ending August 31, 2014, and \$4,000,000 for the state fiscal year ending August 31, 2015, to support outpatient competency restoration pilot programs. It is the intent of the Legislature that the department use the</p>		

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
		<p>money to fund existing pilot programs.</p> <p><i>Delete. This rider was for new funding, which is now included in the base.</i></p>		
67	II-74	<p>Funding for Abstinence Sexual Education. It is the intent of the Legislature that funds appropriated in Strategy A.3.2A.3.3, Abstinence Education, including \$1,118,417 in General Revenue, be utilized for the purpose of implementing abstinence sexual education programs to reduce the need for future family planning services for unwed minors. Any Federal Funds received by the agency for abstinence education are appropriated to the agency for this purpose. Abstinence education means materials and instruction which:</p> <ul style="list-style-type: none"> a. Present abstinence from sexual activity as the preferred choice of behavior for unmarried persons; and b. Emphasize that abstinence from sexual activity, used consistently and correctly, is the only method that is 100 percent effective in preventing pregnancy, sexually transmitted disease, and infection with human immunodeficiency virus or acquired immunodeficiency syndrome. <p><i>Updated strategies for LBB approved budget structure.</i></p>		
68	II-74	<p>Texas Center for Infectious Disease Services and Billing. The Department of State Health Services shall pursue reimbursement, in cases where funding is available, from county governments for tuberculosis services provided to new county indigent patients served at TCID. Any appropriated receipts collected from county governments are hereby appropriated to DSHS in Strategy C.1.1, Texas Center for Infectious Disease.</p>		
69	II-74	<p>Epilepsy Services. Out of funds appropriated above, the Department of State Health Services (DSHS) shall allocate \$2,074,396<u>1,936,850</u> in All Funds in fiscal year 2014<u>2016</u> and \$1,798,224<u>1,936,850</u> in All Funds in fiscal year 2015<u>2017</u> for epilepsy services.</p> <p><i>Updated fiscal years. Leveled amounts between years and modified amounts slightly up to correspond to current and historical contracted amounts for Epilepsy Services.</i></p>		
70	II-74	<p>Local Service Area Planning. Pursuant to Health and Safety Code §533.0352, the Department of State Health Services</p>		

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
		<p>(DSHS) shall develop performance agreements with Local Mental Health Authorities (LMHAs) out of funds allocated in Strategies B.2.1, Mental Health Services for Adults, B.2.2, Mental Health Services for Children, and B.2.3, Community Mental Health Crisis Services, that give regard to priorities identified by the community through a local needs assessment process and expressed in a local service plan.</p> <p>Subject to existing transfer authority in Article IX, Sec. 14.01, Appropriation Transfers, DSHS is granted flexibility to transfer funds between Strategies B.2.1, B.2.2, and B.2.3. in the approval of the local service plan. The performance agreements must include outcomes established in the General Appropriations Act for programs administered by the local authority and financed with General Revenue Funds. Performance related to outcomes must be verifiable by DSHS. Measures relating to outputs and units of service delivered which may be included in the performance agreement, shall be recorded and submitted as required by DSHS.</p>		
71	II-75	<p>End Stage Renal Disease Prevention Program. Out of funds appropriated above in Strategy A.3.1, Health Promotion and Chronic Disease Prevention, the Department of State Health Services shall allocate \$250,000 in General Revenue for fiscal year 20142016 and \$250,000 in General Revenue for fiscal year 20152017 to improve the health outcomes and reduce the economic burdens of chronic kidney disease end-stage renal disease through the End Stage Renal Disease Prevention Program model, Love Your Kidneys. The program shall work in collaboration with the Texas Renal Coalition and the State Chronic Kidney Disease Task Force <u>other state-wide partnerships</u> to educate the medical community and at-risk patients on the importance of early diagnosis and treatment of chronic kidney disease to prevent premature death from cardiovascular disease and other co-morbid conditions, and to delay progression to kidney failure necessitating expensive renal replacement therapy by dialysis or transplantation.</p> <p><i>Updated fiscal years. Chronic Kidney Disease Task Force expired 08/31/13. Broadened scope to include other state-wide partnerships.</i></p>		
72	II-75	<p>Contingency for Trauma Fellowships. Contingent on enactment of legislation relating to appropriation authority over General Revenue—Dedicated Account 5111, Designated Trauma Facility and EMS, and the Texas Higher Education Coordinating Board, funds appropriated to the Department of State Health Services are reduced by \$2,250,000 in fiscal year 2014 and \$2,250,000 in fiscal year 2015 from General Revenue—Dedicated Account 5111, Designated Trauma Facility and EMS. This program at the Texas Higher Education Coordinating Board funds the expansion of physician and nursing trauma fellowships, per Education Code, Chapter 61, Article 9, Subchapter HH, Texas Emergency and Trauma Care Educational</p>		

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
		<p>Partnership Program.</p> <p><i>Delete. The funds were appropriated directly to the Texas Higher Education Board in the FY 2014/2015 biennium.</i></p>		
73	II-75	<p>Contingency for Trauma Registry Funds. Contingent on enactment of legislation relating to appropriation authority over General Revenue—Dedicated Account 5111, Designated Trauma Facility and EMS, General Revenue funds appropriated to the Department of State Health Services are reduced by \$189,348 each fiscal year and appropriations are increased by \$189,348 each fiscal year from General Revenue—Dedicated Account 5111, Designated Trauma Facility and EMS.</p> <p><i>Delete. Pursuant to 2014-15 GAA, II-81, footnote 8, legislation did not pass.</i></p>		
74	II-75	<p>Contingency for Senate Bill 1475. Included in the amounts above, and contingent on passage of SB 1475, or similar legislation relating to jail-based restoration of competency pilot program, by the Eighty-third Legislature, Regular Session, the Department of State Health Services, in addition to other funds, is appropriated \$1,307,250 for fiscal year 2014 and \$1,743,000 in fiscal year 2015 from General Revenue to strategy B.2.3, Community Mental Health Crisis Services, to implement the provisions of the legislation.</p> <p><i>Delete. Consolidated with new Continuation of Mental Health Services rider.</i></p>		
75	II-75	<p>Third Party Health Insurance Exchange Reporting Requirement. Out of funds appropriated above to the Department of State Health Services in strategies A.2.1, Immunize Children and Adults in Texas, A.2.2, HIV/STD Prevention, A.2.3, Infectious Disease Prevention, Epidemiology and Surveillance, A.3.3, Kidney Health Care, A.3.4, Children with Special Health Care Needs, A.3.5, Epilepsy and Hemophilia Services, A.4.1, Laboratory Services, B.1.2, Women and Children's Health Services, B.1.4, Community Primary Care Services, B.2.1, Mental Health Services for Adults, B.2.2, Mental Health Services for Children, B.2.3, Community Mental Health Crisis Services, B.2.4, NorthSTAR Behavioral Health Waiver, B.3.3, Indigent Health Care Reimbursement (UTMB), C.1.1, Texas Center for Infectious Disease, C.1.2, South Texas Health Care System, C.1.3, Mental Health State Hospitals and C.2.1, Mental Health Community Hospitals, the Department of State Health Services shall submit a report containing the following information:</p> <p>a. The fiscal impact of the third party health insurance exchange on the above strategies;</p>		

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
		<p>b. The caseload impact of the third party health insurance exchange on the above strategies; and</p> <p>e. Contingent on the enactment of Senate Bill 1057, or similar legislation by the Eighty third Legislature, Regular Session, 2013, the Department of State Health Services shall report on (1) the number of attestation forms distributed by each above strategy, (2) a description of third party health insurance exchange consumer awareness efforts that were implemented by each above strategy and, (3) an overall analysis of these policies with recommendations for maximizing alternative sources of coverage for clients served in the above strategies.</p> <p>The Department of State Health Services shall submit the report to the Governor's Office and the Legislative Budget Board by December 1, 2014.</p> <p><i>Delete. Caseload and fiscal impact are currently reported to the LBB through the Monthly Financial Report. In addition, unpredictable enrollment rates have diminished the reliability of potential conclusions that could be drawn from this data. There are also pending policy decisions regarding program income reporting requirements, eligibility requirements, and capacity to bill to a third party, that will affect these statistics. Further, program specific considerations in terms of eligibility and operation need to be taken into account in order to capture intended information. Finally, contractors report disparate data, which makes it challenging to assess their revenue impact resulting from transition to private health insurance. Monitoring the effects of this transition is a priority for the agency, and DSHS will continue to identify data to examine the impact of enrollment.</i></p>		
76	II-75	<p>Administration of Third Party Insurance Exchange Savings and Revenue Gains. Appropriated amounts above in strategies A.2.1, Immunize Children and Adults in Texas, A.2.2, HIV/STD Prevention, A.2.3, Infectious Disease Prevention, Epidemiology and Surveillance, A.3.3, Kidney Health Care, A.3.4, Children with Special Health Care Needs, A.3.5, Epilepsy and Hemophilia Services, A.4.1, Laboratory Services, B.1.2, Women and Children's Health Services, B.1.4, Community Primary Care Services, B.2.1, Mental Health Services for Adults, B.2.2, Mental Health Services for Children, B.2.3, Community Mental Health Crisis Services, B.2.4, NorthSTAR Behavioral Health Waiver, B.3.3, Indigent Health Care Reimbursement (UTMB), C.1.1, Texas Center for Infectious Disease, C.1.2, South Texas Health Care System, C.1.3, Mental Health State Hospitals and C.2.1, Mental Health Community Hospitals, includes a reduction of \$3,139,217 in fiscal year 2014 and \$12,883,638 in fiscal year 2015 in General Revenue, and \$338,047 in fiscal year 2014 and \$1,352,188 in fiscal year 2015 in General Revenue Dedicated State Owned Multicategorical Teaching Hospital Account No. 5049 related to the implementation of a third party insurance exchange; and includes an increase of \$75,257 in fiscal year 2014 and \$301,029 in</p>		

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
<p> fiscal year 2015 in General Revenue Dedicated Department of Health Public Health Services Fee Account No. 524, \$585,294 in fiscal year 2014 and \$2,341,178 in fiscal year 2015 in Other Funds related to revenue gains associated with the third party insurance exchange. </p> <p> a. In the event that actual savings or revenue gains related to the implementation of a third party insurance exchange are lower than the amounts listed in Subsection (a), the agency shall notify the Legislative Budget Board at least 30 days prior to a projected deficit in funds. </p> <p> b. In the event the actual savings or revenue gains related to the third party insurance exchange are greater than the amounts listed in Subsection (a), the Department of State Health Services is authorized to expend the General Revenue Funds and General Revenue Dedicated State Owned Multicategorical Teaching Hospital Account No. 5049 Funds thereby made available contingent upon prior written approval from the Legislative Budget Board and Governor. To request approval to expend available General Revenue Related Funds, the agency shall submit a written request to the Legislative Budget Board and the Governor. At the same time, the agency shall provide a copy of the request to the Comptroller of Public Accounts. The request shall include the following information by fiscal year: </p> <ul style="list-style-type: none"> (1) — A detailed explanation of the proposed use(s) of the available General Revenue Related Funds and whether the expenditure(s) will be one time or ongoing; (2) — The amount available by strategy; (3) — The strategy(ies) in which the funds will be expended and the associated amounts, including any matching federal funds; (4) — An estimate of performance levels, and where relevant, a comparison to targets included in this Act; and (5) — The capital budget and/or full time equivalent impact. <p> Additional information requested by the Legislative Budget Board or the Governor shall be provided in a timely manner. </p> <p> The request shall be considered to be disapproved unless the Legislative Budget Board or the Governor issues a written approval within 15 business days of the date on which the staff of the Legislative Budget Board concludes its review of the </p>				

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
		<p>proposal to expend the funds and forwards its review to the Chair of the House Appropriations Committee, Chair of the Senate Finance Committee, Speaker of the House, and Lieutenant Governor.</p> <p>The Comptroller of Public Accounts shall not allow the expenditure of General Revenue Related Funds made available if the Legislative Budget Board provides notification to the Comptroller of Public Accounts that the requirements of this provision have not been satisfied.</p> <p><i>Delete. Caseload and fiscal impact are currently reported to the LBB through the Monthly Financial Report. In addition, unpredictable enrollment rates have diminished the reliability of potential conclusions that could be drawn from this data. There are also pending policy decisions regarding program income reporting requirements, eligibility requirements, and capacity to bill to a third party, that will affect these statistics. Further, program specific considerations in terms of eligibility and operation need to be taken into account in order to capture intended information. Finally, contractors report disparate data, which makes it challenging to assess their revenue impact resulting from transition to private health insurance. Monitoring the effects of this transition is a priority for the agency, and DSHS will continue to identify data to examine the impact of enrollment.</i></p>		
77	II-76	<p>Administrative Attachment: Office of Violent Sex Offender Management. Amounts appropriated above in Strategy G.1.1, Office of Violent Sex Offender Management, are to be used by the Office of Violent Sex Offender Management, an independent agency which is administratively attached to the Department of State Health Services.</p>		
78	II-76	<p>Mental Health Outcomes and Accountability. Out of funds appropriated above in Goal B, Community Health Services, Strategies B.2.1, Mental Health Services for Adults, B.2.2, Mental Health Services for Children, and B.2.3, Community Mental Health Crisis Services, the Department of State Health Services shall withhold ten percent (10%) of the General Revenue quarterly allocation from each Local Mental Health Authority (LMHA) for use as a performance based incentive payment. The payment of the funds withheld shall be contingent upon the achievement of outcome targets set by the department. Initial outcome targets shall be set by the department not later than September 1, 2013. Performance shall be assessed and payments made on a six-month interval. Funds that have been withheld for failure to achieve outcome targets will be used for technical assistance and redistributed as an incentive payment according to a methodology developed by the department. <u>Any unexpended balances of these funds from fiscal year 2016 are appropriated to DSHS for the same purposes in fiscal year 2017.</u></p>		

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
		<i>Deleted requirement for initial targets, because they have been established. Added ability to carry forward any available funding withheld for failure to achieve outcomes so funding can be utilized for technical assistance or redistribution in following year. This is needed due to timing of six month reviews.</i>		
79	II-77	<p>Mental Health Appropriations and the 1115 Medicaid Transformation Waiver. Out of funds appropriated above in Goal B-Community Health Services, Strategies B.2.1, Mental Health Services for Adults, B.2.2, Mental Health Services for Children, and B.2.3, Community Mental Health Crisis Services, the Department of State Health Services by contract shall require that \$183,223,978 in General Revenue funds provided to the department in this biennium be used to the extent possible to draw down additional federal funds through the 1115 transformation waiver or other federal matching opportunities. Nothing in this section shall relieve a Local Mental Health Authority from an obligation to provide mental health services under the terms of a performance contract with the department or to reduce the amount of such obligation specified in the contract.</p> <p>The department shall report to the Legislative Budget Board and the Governor by December 1, 2014<u>2016</u> on efforts to leverage these funds.</p> <p><i>Updated fiscal years.</i></p>		
80	II-77	<p>1915(c) Youth Empowerment Services Waiver Expansion. The Health and Human Services Commission, in conjunction with the Department of State Health Services, shall <u>continue to</u> initiate the expansion of the 1915(c) Youth Empowerment Services (YES) waiver statewide during the 2014-15<u>2016-17</u> biennium. Expansion into new service areas is contingent upon approval by the Centers for Medicare and Medicaid Services (CMS).</p> <p><i>Updated fiscal years and language to reflect continued expansion of the program.</i></p>		
81	II-77	<p>Home and Community-Based Services. Included in funds appropriated above, the Department of State Health Services is appropriated General Revenue in the amounts of \$2,655,006 in fiscal year 2014 and \$5,217,413 in fiscal year 2015 in Strategy B.2.1, Mental Health Services for Adults. Funds shall be utilized to:</p> <p>a. develop a Home and Community Based Services (HCBS) program for adults with complex needs and extended or repeated state inpatient psychiatric stays as defined by the Department; and</p>		

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
		<p>b. seek federal approval for a Medicaid 1915(i) state plan amendment to enable federal financial participation, to the extent possible, in the HCBS program in collaboration with the Health and Human Services Commission.</p> <p><i>Delete. Consolidated with new Continuation of Mental Health Services rider.</i></p>		
82	II-77	<p>Primary Health Care Program. The Department of State Health Services Primary Health Care Program shall not contract with providers that would be ineligible to participate in the Texas Women's Health Program at the Health and Human Services Commission.</p>		
83	II-77	<p>State Hospital System Long Term Plan. Out of funds appropriated above, the Department of State Health Services (DSHS) shall develop a ten-year plan for the provision of psychiatric inpatient hospitalization to persons served by the department. This plan will consider state hospital system operational needs, including infrastructure needs of the existing facilities, future infrastructure needs, capacity needs across various regions of the state, and associated costs. The plan must consider current state funded hospital capacity for individuals requiring hospitalization, timely access to patient care in the least restrictive setting as clinically appropriate, best practices in psychiatric inpatient care, opportunities for patients to receive care closer to their homes, and efficient use of state resources. DSHS is required to seek public input during development of the plan, and is authorized to contract for necessary technical expertise to assist in the development of the plan. DSHS shall coordinate with the Department of Aging and Disability Services in the development and implementation of the plan, in order to ensure consideration of cross-agency issues impacting State Hospitals and State Supported Living Centers. DSHS shall submit the plan to the Office of the Governor and the Legislative Budget Board not later than December 1, 2014 2016.</p> <p>To authorize the implementation of improvements to the state hospital system related to the plan, DSHS shall submit a written request to the Legislative Budget Board and the Governor. The request shall be considered to be approved unless the Legislative Budget Board or the Governor issues a written disapproval within 30 business days of the date on which the staff of the Legislative Budget Board concludes its review of the proposal and forwards its review to the Chair of the House Appropriations Committee, Chair of the Senate Finance Committee, Speaker of the House, and Lieutenant Governor.</p> <p><i>Delete. The report will be completed by December 1, 2014. There are no requirements for an annual update.</i></p>		
84	II-77	<p>Mental Health Children: Prevention and Early Identification Services. Out of funds appropriated above, the Department</p>		

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
		<p>of State Health Services shall distribute any funds appropriated for the purpose of providing prevention and early identification services in B.2.2, Mental Health Services for Children, by a request for proposals for entities to educate school staff and/or community members in an evidence based curriculum focused on awareness of risk factors that lead to emotional disturbance or severe mental illness and available intervention options. The request for proposals should demonstrate that the funds will be allocated:</p> <p>a. to train individuals in a broad based manner across the region that maximizes the number of children having direct contact with the trained individuals;</p> <p>b. in accordance with the greatest needs in the region as identified by the local mental health authority; and</p> <p>c. in a manner that complements existing resources and does not duplicate established training efforts.</p> <p><i>Delete. This rider is no longer needed in the 2016-17 biennium, as DSHS has implemented the requirements of this rider.</i></p>		
85	II 78	<p>Mental Health Program Allocation. Out of funds appropriated above, the Department of State Health Services (DSHS) is directed to use \$43,000,000 in General Revenue over the biennium for the purpose of expanding or improving statewide community mental health services. It is the intent of the Legislature that DSHS allocate these funds equitably to the local mental health authorities (LMHA) and NorthSTAR considering the per capita spending of each organization, among other funding parameters. Out of the funds above, DSHS shall allocate to NorthSTAR an amount not less than \$6,000,000 in General Revenue over the biennium to increase the per person funding available to adult and child enrollees and increase mental health related services provided to clients through the program.</p> <p><i>Delete. This rider is no longer needed in the 2016-17 biennium, as DSHS has implemented the requirements of this rider.</i></p>		
86	— II 78	<p>Mental Health Program for Veterans. Included in the amounts appropriated above to the Department of State Health Services in Strategy B.2.1, Mental Health Services for Adults, is \$2,000,000 in each fiscal year in General Revenue for the purpose of expanding the Mental Health Program for Veterans above the fiscal year 2012-2013 allocation of \$3,000,000 per year for a total allocation of \$5,000,000 for each fiscal year of the 2014-15 biennium.</p> <p>Program funds may be used for, but are not limited to: peer to peer counseling; access to licensed mental health professionals</p>		

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
		<p>for volunteer coordinators and peers; a list of approved training for peers; technical assistance for volunteer coordinators and peers; recruiting, retaining and screening community based therapists; suicide prevention training for volunteer coordinators and peers; and coordinating services with jail diversion programs, such as Veteran Courts. The department may contract with or provide grants to regional and local organizations and other outside entities to carry out the provisions of this rider.</p> <p>Not later than December 1 of each fiscal year, the department shall submit to the Legislature and the Governor's Office a detailed report describing the activities of the program in the preceding year, including, at a minimum: a description of how the program is operated; the number of veterans served; the number of peers and volunteer coordinators trained; a summary of the contracts issued and services provided through those contracts; and recommendations for program improvements.</p> <p><i>Delete. Consolidated with new Continuation of Mental Health Services rider.</i></p>		
87	H-78	<p>State Hospital Oversight – Staffing.</p> <p>a. Out of funds appropriated above, and on a quarterly basis, the Department of State Health Services shall provide a staffing report to the Legislative Budget Board, the Office of the Governor, and the permanent standing committees in the House of Representatives and the Senate with jurisdiction over health and human services. The report should include data on turnover, fill rates, and use of contractors by state hospital and position type, initiatives undertaken during the reporting period to improve staff recruitment and retention, resources expended on the initiatives, and outcomes quantifying the impact of the initiatives.</p> <p>b. Not later than August 31, 2014, the Department of State Health Services shall provide a report to the Legislative Budget Board, the Office of the Governor, and the permanent standing committees in the House of Representatives and the Senate with jurisdiction over health and human services that analyzes data regarding the reasons for staff turnover at state hospitals, identifies patterns in turnover, and makes recommendations for specific interventions to address identified concerns. The report shall include analysis on the fiscal and policy impact of establishing a career ladder at state hospitals for certain positions.</p> <p><i>Delete. This rider is no longer needed in the 2016-17 biennium, as DSHS has implemented the requirements of this rider.</i></p>		
88	H-79	<p>The University of Texas Harris County Psychiatric Center. Out of funds appropriated above in Strategy C.2.1, Mental</p>		

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
		<p>Health Community Hospitals, the Department of State Health Services may expend \$1,200,000 in General Revenue Funds in fiscal year 2014 and \$1,200,000 in General Revenue Funds in fiscal year 2015 for the purpose of funding 6 additional civil beds at the University of Texas Harris County Psychiatric Center to be used for persons needing longer term treatment not to exceed 90 days.</p> <p><i>Delete. This rider is no longer needed in the 2016-17 biennium, as DSHS has implemented the requirements of this rider. Amount included in base funding.</i></p>		
89	II-79	<p>Primary Health Care Services for Women - Unexpended Balance Authority. Out of funds appropriated above in Strategy B.1.4, Community Primary Health Care Services, the Department of State Health Services shall allocate \$50,000,000 in General Revenue in fiscal year 2014<u>2016</u> and \$50,000,000 in General Revenue in fiscal year 2015<u>2017</u> for the purpose of providing primary health care services to women. It is the intent of the legislature that the services include but are not limited to the following: preventative health screenings such as breast and cervical cancer screenings, diabetes, cholesterol, hypertension, and STD-HIV screenings; family planning services including contraception; perinatal services; and dental services. Any unexpended balances remaining on August 31, 2014<u>2016</u> in Strategy B.1.4, Community Primary Health Care Services, are appropriated to the agency for the fiscal year beginning September 1, 2014<u>2016</u> for the same purposes.</p> <p><i>Updated fiscal years.</i></p>		
90	II-79	<p>Healthy Community Collaboratives. It is the intent of the Legislature that out of funds appropriated above, tThe Department of State Health Services (DSHS) shall allocate up to \$25,000,000 in General Revenue over the biennium in Strategy B.2.3, Community Mental Health Crisis Services to fund grants to serve persons experiencing homelessness and mental illness in a maximum of the five most populous urban municipalities located in counties with a population over one million that:</p> <ul style="list-style-type: none"> a. Promote collaboration based on locally identified priorities; b. Leverage funding in an amount at least equal to the grant awarded; c. Identify definable outcome measures that may include but are not limited to addressing homelessness, criminal recidivism, emergency room utilization, substance abuse, employment rates, and local economic benefit. 		

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
		<p>Funds appropriated in Strategy, B.2.3, Community Mental Health Crisis Services for Health Community Collaboratives should evidence significant coordination and collaboration between local mental health authorities, municipalities, and other community stakeholders. It is the intent of the Legislature that the collaborative be self-sustaining after seven years. Grants may be awarded to new and existing collaboratives and special consideration shall be given to new collaboratives.</p> <p>If a collaborative also receives funds from the Texas Department of Housing and Community Affairs (TDHCA), then DSHS shall ensure that the grant funding under this section is in coordination with the funds from TDHCA.</p> <p>Any unexpended balances of these funds from fiscal year 2014<u>2016</u> are appropriated to DSHS for the same purposes in fiscal year 2015<u>2017</u>. DSHS shall use funds for these purposes to the extent allowed by state law. DSHS shall also report to the Legislative Budget Board and the Governor the amount and type of expenditure and progress of the project by December 1, 2014<u>2016</u>.</p> <p><i>Updated fiscal years. Deleting the cap will allow DSHS to respond timely to public and behavioral health issues, by providing DSHS more latitude in managing funds appropriated to the agency.</i></p>		
91	II-79	<p><u>Contingency for Family Planning Services – Unexpended Balance Authority.</u></p> <p>a. Out of funds appropriated above in Strategy B.1.3, Family Planning Services, \$16,057,982 out of the General Revenue fund for fiscal year 2014 and \$16,057,982 out of the General Revenue fund for fiscal year 2015 are contingent on the Department of State Health Services not receiving federal funds under Title X of the Public Health Service Act to provide family planning services. None of the funds appropriated above to the Family Planning Program shall be used to pay providers who would be ineligible to participate in the Texas Women's Health Program at the Health and Human Services Commission.</p> <p>b. If the Department receives federal funds under Title X of the Public Health Service Act to provide family planning services subsequent to receiving General Revenue funds described by this rider, the Department shall transfer an amount of General Revenue equal to that of the federal funds received to Strategy B.1.3, Pregnant Women, of the Health and Human Services Commission.</p> <p>e. Any unencumbered and unexpended balances appropriated to the Department of State Health Services above in Strategy</p>		

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
		<p>B.1.3, Family Planning Services, described by this rider for fiscal year 2014<u>2016</u> are appropriated to the Department in fiscal year 2015<u>2017</u> for the same purpose.</p> <p><i>Deleted contingency appropriation language related to GR replacement of federal Title X funds while retaining appropriation transfer authority.</i></p>		
92	II-80	<p>Community Mental Health Services Wait List Funding. Out of funds appropriated above in Strategies B.2.1, Mental Health Services for Adults, and B.2.2, Mental Health Services for Children, the Department of State Health Services is directed to use \$48,198,728 in General Revenue funds over the biennium for the purposes of eliminating the waiting list for services. It is the intent of the Legislature that any of these funds that cannot be used for this purpose shall be allocated among Local Mental Health Authorities with below average per capita funding levels to increase equity in funding allocations.</p> <p><i>Delete. This rider is no longer needed in the 2016-17 biennium, as DSHS has implemented the requirements of this rider.</i></p>		
93	II-80	<p>Collection of Emergency Room Data. Out of funds appropriated in Strategy A.1.2, <u>Health Registries, Information, and Vital Records</u> Health Data and Analysis, the Department of State of Health Services shall collect emergency room data as set forth in Chapter 108 of the Health and Safety Code. The Department shall use the data to measure and report potentially preventable emergency room visits, including potentially preventable mental health and substance abuse emergency room visits.</p> <p>The Department shall submit the results of their findings to the Legislative Budget Board, Governor, and Chairs of the Committees in each House with jurisdiction over public health issues on an annual basis, beginning December 31, 2014.</p> <p><i>Updated strategies for LBB approved budget structure.</i></p>		
94	II-80	<p>Study and Report on Birthing Centers.</p> <p>a. Not later than June 30 of each year of the 2014-2015 biennium, out of funds appropriated above, the Department of State Health Services shall collect from each birthing center, as defined by Section 244.002, Health and Safety Code, that is licensed in this state the following information:</p>		

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
		<p>(1) — the number of women who gave birth at the birthing center;</p> <p>(2) — the number of live births at the birthing center;</p> <p>(3) — the number of births of stillborn infants at the birthing center;</p> <p>(4) — the number of women transferred by the birthing center to another facility for birth or postpartum complications;</p> <p>(5) — the number of infants transferred by the birthing center to another facility for complications;</p> <p>(6) — the number of women with multiple gestations who received treatment at the birthing center;</p> <p>(7) — the number of vaginal breech deliveries at the birthing center;</p> <p>(8) — the number of births at the birthing center by women who have had a previous uterine surgery, including a cesarean delivery;</p> <p>(9) — the gestational age of infants at delivery at the birthing center;</p> <p>(10) — the number of infants with an APGAR score of less than three at five minutes after delivery at the birthing center;</p> <p>(11) — the number of women and infants admitted to a hospital not later than the 72nd hour after delivery at the birthing center; and</p> <p>(12) — the number of women and infants who visited an emergency room not later than the 72nd hour after delivery at the birthing center.</p> <p>b. Not later than August 31 of each year of the 2014–2015 biennium, out of funds appropriated above, the Department of State Health Services shall study the operations of each birthing center described by Subsection (a) of this rider and submit a</p>		

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
		<p>report in a format to be determined by the Legislative Budget Board that includes analysis and aggregate data to the Governor, the Legislative Budget Board, and the appropriate standing committees of the Legislature.</p> <p><i>Delete. This rider is no longer needed in the 2016-17 biennium, as DSHS has implemented the requirements of this rider.</i></p>		
95	II-81	<p>Harris County Jail Diversion Pilot Program. Out of funds appropriated above, the Department of State Health Services (DSHS) shall allocate \$5,000,000 for fiscal year 2014 and \$5,000,000 for fiscal year 2015 from strategy B.2.1, Mental Health Services for Adults, to implement a mental health jail diversion pilot program in Harris County. In cooperation with the county judge in Harris County, DSHS shall establish a pilot program in Harris County to be implemented by the county judge for the purpose of reducing recidivism and the frequency of arrest and incarceration among persons with mental illness in that county. The Harris County Commissioners Court shall contribute funding to the pilot program in an amount that is equivalent to the funds provided by the state for the pilot program.</p> <p><i>Delete. Consolidated with new Continuation of Mental Health Services rider.</i></p>		
96	II-81	<p>Family Planning Pharmaceutical Pricing. It is the intent of the legislature that the Department of State Health Services shall attempt to locate improved pharmaceutical pricing or reduced pharmaceutical costs to address the loss of federal 340B drug pricing for family planning providers for services provided through funding in Strategy B.1.3, Family Planning.</p> <p><i>Delete. 340B pricing issue has been resolved via collaboration with HIV/STD.</i></p>		
97	II-81	<p>Texas Council on Cardiovascular Disease and Stroke. Out of funds appropriated above in Strategy A.3.1, Chronic Disease Prevention, the Department of State Health Services (DSHS) may expend \$2,500,000 in General Revenue Funds in fiscal year 2014 and \$2,500,000 in General Revenue Funds in fiscal year 2015 <u>\$5,000,000 in General Revenue Funds over the 2016-17 biennium</u> for the purpose of funding the Texas Council on Cardiovascular Disease and Stroke specific <u>cardiovascular disease and stroke projects.</u> The Texas Council on Cardiovascular Disease and Stroke <u>Of these funds, DSHS shall allocate \$4,500,000 of those funds over the biennium to the University of Texas System for the administration of the statewide stroke clinical research network, Stroke System of Care Coordination (Lone Star Stroke,) and \$500,000 of these funds over the biennium</u> to <u>for the Stroke/STEMI (ST-Segment Elevation Myocardial Infarction) Data Collection for data collection activities.</u></p>		

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
		<p><i>Updated fiscal years. The wording of the rider was unclear and delayed implementation. The rider stated that DSHS "may" expend the funds, "for the purpose of funding the Texas Council on Cardiovascular Disease and Stroke." DSHS does not fund advisory councils and the council has no mechanism of receiving funds. The rider stated that the Council, "shall allocate" funds, "to the stroke system of care coordination (Lone Star Stroke)" and, "to the Stroke/STEMI (ST-Segment Elevation Myocardial Infarction) data collection." Funding cannot be allocated to Lone Star Stroke because it is not an incorporated entity.</i></p>		
98	II-81	<p>Exempt Salary for the Commissioner of Department of State Health Services. The annual compensation for the individual occupying the position of Commissioner of the Department of State Health Services on September 1, 2013<u>2015</u> shall be \$210,000. Notwithstanding the rate listed in the Department's "Schedule of Exempt Positions," the annual salary for any other individual subsequently occupying that exempt position may not exceed \$183,750.</p> <p><i>Updated fiscal years.</i></p>		
NEW		<p><u>Unexpended Balance (UB) Authority for Rebate Revenues.</u> <u>The Department of State Health Services Rebate Revenue amounts in Strategy A.2.2, HIV/STD Prevention, including unexpended and unobligated balances by the end of the state fiscal year, are allowed to carry forward to the following fiscal year for use in the related program areas.</u></p> <p><i>Drug manufacturer rebate revenues earned by the HIV Medication Program and received late in the state fiscal year are difficult to expend before the end of the fiscal year. This rider would allow automatic roll forward into the second year of the biennium.</i></p>		
NEW		<p><u>Unexpended Balance (UB) Authority for Residency Program.</u> <u>The Department of State Health Services is hereby authorized to transfer all unexpended balances forward to the following fiscal year within Strategy C.1.3, Mental Health State Hospitals, and any unexpended balances that exist at the end of a fiscal year are appropriated for use during the following fiscal year for the same purpose.</u></p> <p><i>The ability to UB funds allows DSHS to respond timely to public and behavioral health issues that cross biennia, by providing DSHS more latitude in managing funds appropriated to the agency.</i></p>		
NEW		<p><u>Continuation of Mental Health Services.</u> <u>It is the intent of the Legislature that the Department of State Health Services</u></p>		

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
	<p><u>shall continue to support the following programs as directed by enactment of new riders in the General Appropriations Act in the 2014-2015 Biennium:</u></p> <ul style="list-style-type: none"> a. <u>Jail-Based Restoration of Competency Program appropriated through B.2.3, Community Mental Health Crisis Services;</u> b. <u>Home and Community-Based Services appropriated through B.2.1, Mental Health Services for Adults;</u> c. <u>Mental Health Program for Veterans appropriated through B.2.1, Mental Health Services for Adults; and</u> d. <u>Harris County Jail Diversion Pilot Program appropriated through B.2.1, Mental Health Services for Adults.</u> <p><i>Consolidating riders 74, 81, 86, and 95 will streamline the bill pattern.</i></p>			
NEW	<p><u>Texas Electronic Vital Events Registrar.</u> <u>In addition to the amounts otherwise appropriated herein, any collected funds and interest earned, as allocated by the Comptroller of Public Accounts to the General Revenue Dedicated Fund 019 within strategy A.1.2 Health Data and Analysis, in excess of \$4,477,075 per fiscal year of the 2016-17 biennium, less amounts necessary to provide for operating costs of the existing system (Texas.gov), until full implementation of the Texas Electronic Vital Events Registrar is complete. These General Revenue Dedicated funds shall be transferred monthly by the Comptroller of Public Accounts to such funds from the General Revenue Fund, and all amounts so transferred are hereby appropriated to the Department of State Health Services (DSHS) for use during the 2016-17 biennium. DSHS is hereby authorized to expend these funds for the purpose of improving security and data quality through development and implementation of a fully integrated and comprehensive electronic vital records system. Any funds remaining at the end of the fiscal year are appropriated to the following fiscal year for the same purpose.</u></p> <p><i>The current statewide electronic system, Texas Electronic Registrar (TER) is deployed across registration districts and licensed institutions, including hospitals, birthing centers, funeral homes, medical examiners, and justices of the peace throughout Texas. TER is an aged system, both in terms of technology and infrastructure. Costs to maintain the database, ensure reliability and availability, and meet the state and federal data security requirements for safeguarding protected health information have risen. The TxEVER Project will implement a new system with a primary goal of improving security and data quality associated with registration vital events and issuance of certified records.</i></p>			

Agency Code: 537	Agency Name: Department of State Health Services	Prepared By: Becky O'Brien	Date: 8/11/2014	Request Level: Base
NEW		<p><u>Cash Management Contingency.</u> The Department of State Health Services (DSHS) is hereby authorized to transfer funds across each year of the biennium between any of the DSHS strategies for the purpose of alleviating the temporary cash flow needs. The transfer of funds shall be repaid to the General Revenue Fund by the end of the biennium in which the funds were transferred under procedures and standards established by the Comptroller of Public Accounts.</p> <p><i>The ability to transfer funds allows DSHS to respond timely to issues that may arise, providing more latitude in managing funds appropriated to the agency.</i></p>		
NEW		<p><u>Cost Pools.</u> The Department of State Health Services (DSHS) is hereby authorized to transfer funds to separate accounts authorized by agency rider and established by the State Comptroller for payment of certain support costs not directly attributable to a single program.</p> <p><i>The ability to transfer funds into cost pools provides DSHS with more latitude in managing shared support costs within funds appropriated to the agency.</i></p>		