



Exceptional Items Summary

EXCEPTIONAL ITEM	FY 2010		FY 2011		BIENNIAL TOTAL		FY 2010	FY 2011
	GR	All Funds	GR	All Funds	GR	All Funds	FTEs	FTEs
Exceptional Items:								
1. Maintaining Current Operations	\$ 28,782,048	\$ 39,268,566	\$ 34,059,971	\$ 44,627,245	\$ 62,842,019	\$ 83,895,811	87.5	87.5
2. Regulatory	7,279,996	7,279,996	11,506,211	11,506,211	18,786,207	18,786,207	57.7	133.7
3. Health Data Collection & Analysis	9,652,427	12,675,338	9,060,534	12,282,835	18,712,961	24,958,173	54.6	68.9
4. Vital Statistics	3,492,794	3,492,794	3,162,250	3,162,250	6,655,044	6,655,044	14.2	24.3
5. Information Technology Support for Critical Programs	15,654,867	15,654,867	14,635,242	14,635,242	30,290,109	30,290,109	12.1	12.1
6. Disaster Recovery and Public Health Preparedness	16,754,841	16,754,841	7,311,530	7,311,530	24,066,371	24,066,371	37.8	37.8
7. Stipends for Psychiatrist and Medical Residents	1,386,399	1,386,399	1,350,396	1,350,396	2,736,795	2,736,795	-	-
8. Building & Equipment Repair & Replace	2,071,806	43,337,891	1,591,673	27,516,157	3,663,479	70,854,048	-	-
9. Substance Abuse Services	27,050,629	34,796,731	27,195,549	34,872,984	54,246,178	69,669,715	15.2	15.2
10. Community Mental Health Services	38,430,919	38,430,919	47,105,578	47,105,578	85,536,497	85,536,497	16.2	16.2
11. Chronic Disease Prevention	10,748,330	10,889,491	14,867,553	15,024,604	25,615,883	25,914,095	27.3	27.3
12. Infectious Disease Prevention	8,079,969	8,113,423	8,759,736	8,793,190	16,839,705	16,906,613	35.7	35.7
13. Community Mental Health Services - Maintenance of Critical Services at LMHA	13,400,000	13,400,000	13,400,000	13,400,000	26,800,000	26,800,000	-	-
Total Exceptional Items	\$ 182,785,025	\$ 245,481,256	\$ 194,006,223	\$ 241,588,222	\$ 376,791,248	\$ 487,069,478	358.3	458.7

Note: GR shown above includes GR and GR-Dedicated funds

Texas Department of State Health Services

Exceptional Item 1

Maintaining Current Operations

Funding Request

Total (All Funds)

Method of Financing:

General Revenue

GR - Dedicated

Other Funds

Federal Funds

Number of FTEs

	FY 2010	FY 2011	Biennium
\$	39,268,566	\$ 44,627,245	\$ 83,895,811
	21,920,734	26,125,096	48,045,830
	6,861,314	7,934,875	14,796,189
	9,794,673	9,876,673	19,671,346
	691,845	690,601	1,382,446
	87.5	87.5	

Request

This funding request consists of three primary components:

- 1) \$62,264,182 to cover increased costs for the 2010-11 biennium including but not limited to pharmaceuticals, medical supplies, travel, food for clients, family planning rate increase, fuel, and other operating costs. A large amount of these costs are attributable to maintaining the 2,477 capacity level at the state mental health hospitals.
- 2) \$2,168,788 for case management associated with the Alberto N. settlement, phased in during the 2008-09 biennium.
- 3) \$12,000,000 to sustain the substance abuse treatment rate increase implemented at the beginning of FY 2008 to alleviate deterioration in the program's provider base.

This exceptional items includes request to increase the FTE cap for 87.5 FTEs in FY 2009 and continuing at the increased level in 2010-11 for:

- 1) the Rio Grande State Center (79.5) funded by an IAC with the Department of Aging and Disability Services,
- 2) Medicaid Y.E.S. waiver (2.0) for children with severe emotional disturbances,
- 3) the Center for Disease Control (3.0) for the expansion of the tobacco use/prevention grant, and
- 4) Medicare grant (3.0) to perform federal surveys of health facilities seeking to become medicare providers to determine compliance with federal / state statutes and regulations.

Program Impact

	FY 2010	FY 2011
% of 1996 Epizootic Zone that is free from Texas Fox Rabies (OC - cumulative)	62%	62%
Average Mo cost per adult served in treatment programs for SA (EF - cumulative)	1,533	1,533
Average Mo cost per youth served in treatment programs for SA (EF - cumulative)	3,709	3,709
Average Mo number of SMHF consumers receiving new generation meds (OP - incremental)	794	887
Average Daily Census of State MH Facilities (OP - incremental)	104	127
Number of Admissions to State Mental Health Facilities (OP - incremental)	739	904

Texas Department of State Health Services

Exceptional Item 2

Regulatory

Funding Request

Total (All Funds)

Method of Financing:

General Revenue

GR - Dedicated

Other Funds

Federal Funds

Number of FTEs

	FY 2010	FY 2011	Biennium
\$	7,279,996	11,506,211	18,786,207
	5,873,830	9,585,045	15,458,875
	1,406,166	1,921,166	3,327,332
			-
			-
	57.7	133.7	

Request

DSHS has responsibility for five regulatory strategies:

- 1) Food and Drug Safety,
- 2) Environmental Health,
- 3) Radiation Safety and Control,
- 4) Health Care Professionals, and
- 5) Health Care Facilities.

- DSHS's ability to protect consumers has been steadily eroding for the past decade. All regulatory programs have seen tremendous growth in the numbers of licensees. For every new licensee there is a increase in inspections, surveys, sampling and complaint intake, investigations and enforcement activities.

- In addition, over the last decade, a number of new programs and/or mandates have been added without the requisite resources.

- DSHS is requesting additional staff, operating costs and completion of the Regulatory Automation System (RAS) to meet its obligations. Completion of the RAS will provide a single database of all entities and individuals licensed by DSHS for more efficient inspection and enforcement activity. Funding to recruit and retain critical health professionals, (e.g. sanitarians) is a key component to DSHS's response capability and is also included in this request.

Program Impact	FY 2010	FY 2011
Food, Meat & Drug Safety: Number of surveillance activities (OP - incremental)	8,000	23,500
Environmental Health: Number of surveillance activities conducted (OP - incremental)	500	4,000
Radiation Control: number of surveillance activities (OP - incremental)	2,500	6,500
Number of professional complaint investigations conducted (OP - incremental)	110	150
Health Care Facilities: No. of health care delivery entity surveys conducted (OP - incremental)	100	300
Health Care Facilities: No. of health care facility complaint investigations conducted (OP - incremental)	75	225

Texas Department of State Health Services

Exceptional Item 3

Health Data Collection and Analysis

Funding Request

Total (All Funds)

Method of Financing:

General Revenue

GR - Dedicated

Other Funds

Federal Funds

Number of FTEs

	FY 2010	FY 2011	Biennium
\$	12,675,338	\$ 12,282,835	\$ 24,958,173
	5,823,544	5,578,188	11,401,732
	3,828,883	3,482,346	7,311,229
			-
	3,022,911	3,222,301	
	54.6	68.9	

Request

Funds are requested to improve the timeliness, completeness, and validity of health information collected through registries and disease surveillance systems.

- Information on cancer, birth defects, trauma, lead poisoning, and occupational diseases will be more current and more readily available to the public and researchers as well as to DSHS. Data collected through these registries are used to study patterns of disease in populations for targeting prevention and control programs, investigating unusual occurrence of disease, identifying individuals at highest risk, developing state health policies to protect the public, and to evaluate performance of public health programs.
- Funds will be used to develop a new surveillance system for health care associated infections. Sub-standard technology will be replaced with web-based systems; common functions will be integrated across registries and linkage to other health information systems will be implemented. Funds would be used to integrate child health records with newborn screening records and enhance the current Newborn Screening web-based/file transfer system.
- FTEs are needed to expand collection efforts to new sources, meet increasing caseloads, improve case follow-up of lead poisoning in children, support an injury prevention and trauma registry program, and operate the surveillance system for health care associated infections.
- Funds and FTEs are requested for the Laboratory access improvement strategies to address the concerns of the Texas Health Steps providers by creating service and treatment of health risks and disorders that affect children enrolled in Medicaid. The strategies focus on improving the effectiveness of laboratory processes and customer service, with special provisions for blood lead testing and follow-up.

Program Impact

	FY 2010	FY 2011
Number of abstracted cases for epidemiologic study (OP - incremental)	463,139	462,389
Average cost per laboratory test performed (EF- cumulative)	15.22	15.22

Texas Department of State Health Services

Exceptional Item 4

Vital Statistics

Funding Request

Total (All Funds)

Method of Financing:

General Revenue

GR - Dedicated

Other Funds

Federal Funds

Number of FTEs

	FY 2010	FY 2011	Biennium
Total (All Funds)	\$ 3,492,794	\$ 3,162,250	\$ 6,655,044
Method of Financing:			
General Revenue	2,832,794	2,502,250	5,335,044
GR - Dedicated	660,000	660,000	1,320,000
Other Funds			-
Federal Funds			-
Number of FTEs	14.2	24.3	

Request

DSHS is responsible for collecting, editing for accuracy and completeness, storing, securing and reporting the data to customers and trading partners. The processes, systems and staffing levels in place do not support the timely production and release of Texas vital statistics.

- Funding is requested for indexing of 6,000,000 birth records currently not indexed and needed for compliance with the U.S. Department of Homeland Security Real ID Act. Under this act, Federal agencies are prohibited, effective May 11, 2008, from accepting a driver's license as a State-issued personal identification card for an official purpose unless the issuing State is meeting the requirements of the Act. The principal impact of this legislation lies on the Department of Public Safety (DPS). However electronic inquiry to DSHS vital record system will be necessary to verify the validity of birth certifications presents to DPS to obtain a REAL ID compliant drivers license or identification card.

Program Impact

	FY 2010	FY 2011
Average number of days to certify or verify vital statistics records (EF - cumulative)	13	12

Texas Department of State Health Services

Exceptional Item 5

Information Technology Support for Critical Programs

Funding Request

Total (All Funds)

Method of Financing:

General Revenue

GR - Dedicated

Other Funds

Federal Funds

Number of FTEs

	FY 2010	FY 2011	Biennium
\$	15,654,867	\$ 14,635,242	\$ 30,290,109
	15,654,867	14,635,242	30,290,109
			-
			-
			-
	12.1	12.1	

Request

DSHS programs face many challenges as a result of outdated and insufficient information technology.

- The viability of patient records, client case files, regulatory rules, pharmacy inventory, vital records and disease registries are at risk.
- Internet connectivity among DSHS statewide offices is not reliable.
- An inadequate telephone system and outdated UPS devices have resulted in major telephone outages, limiting the ability to provide client services and to respond to emergencies.
- Over 2,600 employees are working with outdated desktop/laptop computers that have not been upgraded under the seat management. Data sharing capabilities among programs that are crucial to protecting the public's health are limited.

Additional IT resources are required to:

- Provide the timely consolidated inpatient and outpatient information needed for effective healthcare acquired infections programs;
- Provide a shared system among our mental health and substance abuse providers to keep up with increased clientele, exchange diagnostic information, and improve access to acute services, and to connect state hospitals with a statewide electronic medical record system that addresses the problem of patients suffering from delayed care while waiting for records to be obtained from remote locations.
- Provide bar coding technology essential to eliminating the possibility of errors in an automated medication dispensing system.
- Provide video capabilities needed to allow for conducting judicial and medical hearings with mental health hospitals, without requiring travel and risking personal security.

Texas Department of State Health Services

Exceptional Item 6

Disaster Recovery & Public Health Preparedness

Funding Request

Total (All Funds)

Method of Financing:

General Revenue

GR - Dedicated

Other Funds

Federal Funds

Number of FTEs

	FY 2010	FY 2011	Biennium
\$	16,754,841	\$ 7,311,530	\$ 24,066,371
	14,703,516	6,310,407	21,013,923
	2,051,325	1,001,123	3,052,448
	-	-	-
	-	-	-
	37.8	37.8	

Request

DSHS is seeking funding to improve its core response for day to day outbreaks as well as natural or man-made disasters. This requests includes funds to:

- Maintain and improve regional capabilities in responding to emergencies by creating strike teams to respond to emergencies, participate in planning and exercises of local, state and federal entities; and work with local health departments to develop/amend/review and revise local public health emergency response plans and update annually.
- Purchase equipment to successfully respond to a need to evacuate patients from an approaching hurricane/disaster and provide operational support to improve response and recovery efforts during disasters.
- Improve the mental health components of disaster preparedness by funding mental health professionals in the DSHS regional offices to collaborate with Community Mental Health Centers (CMHC) in the preparation and event of an emergency.
- Renovate buildings at four state hospitals so that they may be utilized as medical special needs (MSN) shelters in the event of a disaster.
- Improve border disaster preparedness, focused on food safety, border infectious disease response, and disaster response.
- Strengthen community public health activities through grants to encourage and support the expansion of existing or the creation of new local health departments.
- Recruit and retain critical health professionals (epidemiologists, microbiologists, chemists and medical technicians)

Program Impact

	FY 2010	FY 2011
Number of LHD contractors carrying out essential public health plans (OP - incremental)	3	3

Texas Department of State Health Services

Exceptional Item 7

Stipends for Psychiatrist and Medical Residents

Funding Request

Total (All Funds)

Method of Financing:

General Revenue

GR - Dedicated

Other Funds

Federal Funds

Number of FTEs

	FY 2010	FY 2011	Biennium
\$	1,386,399	\$ 1,350,396	\$ 2,736,795
	1,386,399	1,350,396	2,736,795

Request

There is currently a critical shortage of professionals providing public and mental health care in the state health delivery system.

- DSHS is requesting funding for 17 full-time equivalent psychiatric resident positions which would allow for permanent psychiatric training programs. These positions would fulfill requirements for training by academic medical centers that sponsor psychiatric residency training programs.
- In addition, DSHS is currently accredited for four residents in the DSHS Public Health and Preventive Medicine Residency program; however to support sufficient salary levels to fill the positions and to fully operate the program additional funds are required.
- If funded, DSHS is seeking an exemption from the FTE cap for these positions and an exemption from the Out of State Travel Cap due to a high number of required trainings held in out of state locations.

Texas Department of State Health Services

Exceptional Item 8

Building and Equipment - Repair and Replacement

Funding Request

Total (All Funds)

Method of Financing:

General Revenue

GR - Dedicated

Other Funds

Federal Funds

Number of FTEs

	FY 2010	FY 2011	Biennium
Total (All Funds)	\$ 43,337,891	\$ 27,516,157	\$ 70,854,048
Method of Financing:			
General Revenue	2,071,806	1,591,673	3,663,479
GR - Dedicated			-
Other Funds	41,266,085	25,924,484	67,190,569
Federal Funds			-
Number of FTEs	-	-	

Request

This item funds the necessary repairs, renovations and construction projects required to maintain the state hospitals at acceptable levels of effectiveness and safety.

- Funds will also be used to intensify facility emergency generator capabilities, intended to support the hospitals technology systems. The technology systems increased capability is essential for maintaining patient health information and to address continued availability for new patient information (patient medication, nutritional requirements, etc.) during power outages, as required by the Joint Commission on Accreditation of Healthcare Organizations.
- Additionally, this item funds the purchase and replacement of equipment and furniture necessary for operational efficiency. This request only addresses the most critical capital equipment items.

Funding for this request is crucial to providing a safe, functional, supportive, and effective environment for patients, and staff .

Texas Department of State Health Services

Exceptional Item 9

Substance Abuse Services

Funding Request

Total (All Funds)

Method of Financing:

General Revenue

GR - Dedicated

Other Funds

Federal Funds

Number of FTEs

	FY 2010	FY 2011	Biennium
\$	34,796,731	\$ 34,872,984	\$ 69,669,715
	27,050,629	27,195,549	54,246,178
			-
			-
	7,746,102	7,677,435	15,423,537
	15.2	15.2	

Request

Current funding levels for substance abuse prevention, intervention and treatment services do not support adequate treatment provider rates and is insufficient to provide needed access to treatment and prevention. This includes persons with mental health diagnoses who need intensive substance abuse treatment.

- The funding requested will expand prevention services, increase rates for treatment providers, expand detoxification services, provide recovery support funds and service coordination, expand Outreach, Screening, Assessment and Referral Provider services, expand the availability of detoxification and residential treatment for persons with co-occurring mental health diagnoses, and increase the availability of medication assisted treatment.
- It will also expand the adult Medicaid substance abuse benefit to include outpatient detoxification and outpatient counseling.

Program Impact

	FY 2010	FY 2011
Average Mo number of adults served in substance abuse prevention program (OP - incremental)	13,094	13,094
Average Mo number of youth served in substance abuse prevention program (OP - incremental)	43,074	43,074
Average Mo number of adults served in treatment programs for SA (OP - incremental)	3,007	3,007
Average Mo cost per adult served in treatment programs for SA (EF - cumulative)	1,529	1,529
Average Mo cost per youth served in treatment programs for SA (EF - cumulative)	3,676	3,676
No. of Co-Occuring Psychiatric SA Disorder clients served (EX - cumulative)	8,608	8,608

Texas Department of State Health Services

Exceptional Item 10

Community Mental Health

Funding Request

Total (All Funds)

Method of Financing:

General Revenue

GR - Dedicated

Other Funds

Federal Funds

Number of FTEs

	FY 2010	FY 2011	Biennium
\$	38,430,919	\$ 47,105,578	\$ 85,536,497
	38,430,919	47,105,578	85,536,497
			-
			-
			-
	16.2	16.2	

Request

Through this exceptional item, DSHS seeks funding to enhance community based mental health service delivery in Texas. These dollars will be split between 3 projects.

- First, it will continue the crisis redesign implementation begun in FY 2008. The following crisis services are targeted for further enhancement: Psychiatric Emergency Service Centers (and related diversion projects) in underserved areas and Crisis Respite Services for children. This includes continuing the external evaluation.
- Second, this item will provide an intensive package of engagement and transition services for 4,163 adults and 630 children. Communities will work to prioritize high needs persons who are not able to be served today post-crisis.
- Third, funds will be used to expand the availability of intensive adult and child packages of ongoing services - targeting recipients of the transition services.

Program Impact	FY 2010	FY 2011
Average Monthly Number of Adults Receiving Community MH Services (OP - incremental)	949	1,897
Average Monthly Cost Per Adult: Community Mental Health Services (EF - cumulative)	374.00	374.00
Average Monthly Number of Children Receiving Community MH Services (OP - incremental)	132	272
Average Monthly Cost Per Child Receiving Community MH Services (EF - cumulative)	451.00	451.00

Texas Department of State Health Services

Exceptional Item 11

Chronic Disease Prevention

Funding Request

Total (All Funds)

Method of Financing:

General Revenue

GR - Dedicated

Other Funds

Federal Funds

Number of FTEs

	FY 2010	FY 2011	Biennium
\$	10,889,491	\$ 15,024,604	\$ 25,914,095
	8,011,038	11,632,083	19,643,121
	2,737,292	3,235,470	5,972,762
			-
	141,161	157,051	298,212
	27.3	27.3	

Request

Chronic diseases like heart disease, stroke, type 2 diabetes, and cancer are the leading causes of death and disability in Texas. They are responsible for approximately 70% of all deaths, and cause major limitations in daily living for almost 10% of the population. Although chronic diseases are among the most common and costly health problems, they are also among the most preventable. People can prevent or control the devastating effects of these diseases by avoiding tobacco, eating healthy foods, being physically active, maintaining a health weight, controlling blood pressure and blood cholesterol.

DSHS is requesting funding to:

1) Fund a Healthy People/health Communities (HP/HC) Program that would include prevention and health promotion interventions in communities. The HP/HC would provide a number of local communities the capacity to improve the health behaviors of their constituents to prevent and control obesity and related chronic diseases.

They will address:

- a) obesity through interventions designed to improve nutrition and increase levels of physical activity;
- b) cardiovascular disease and stroke through the implementation of evidence-based policies and programs in healthcare sites and worksites, and changing systems of care to ensure compliance with evidence-based guidelines for screening, diagnosis and treatment; and
- c) support of the mayors fitness council grant program.

2) Assist tobacco users who want to quit, and expand existing prevention efforts through increased availability of cessation services, increasing the number of community coalitions providing comprehensive activities, and increasing youth prevention activities.

3) Provide screening to newborns for cystic fibrosis and case management to follow screen positive infants to assure timely treatment.

Program Impact

	FY 2010	FY 2011
Average cost per laboratory test performed (EF - cumulative)	17.00	17.00
No. of TX communities implementing comprehensive Tobacco Prevention programs (OP - incremental)	2	2

Texas Department of State Health Services

Exceptional Item 12

Infectious Disease Prevention

Funding Request

Total (All Funds)

Method of Financing:

General Revenue

GR - Dedicated

Other Funds

Federal Funds

Number of FTEs

	FY 2010	FY 2011	Biennium
\$	8,113,423	\$ 8,793,190	\$ 16,906,613
	8,079,969	8,759,736	16,839,705
			-
			-
	33,454	33,454	66,908
	35.7	35.7	

Request

DSHS is seeking additional funds to reduce the spread of infectious disease through:

- 1) improved laboratory testing to detect disease earlier;
- 2) increased testing for HIV and disease intervention to prevent the spread of HIV, and
- 3) increased TB services.

Funds are requested to implement improved laboratory testing for TB, Chlamydia, and gonorrhea. Funding is also requested to upgrade the cervical cancer screening program for the women receiving public health care in the State of Texas. This will enable the Laboratory to detect and report diseases more rapidly resulting in earlier diagnosis and care of the patient and reducing further spread of the diseases.

Over one quarter of Texas who are diagnosed with HIV receive an AIDS diagnosis within one month, indicating they were diagnosed late in the course of the disease when it is much more costly to treat. In September, 2006, the Centers for Disease Control and Prevention published new recommendations that voluntary HIV screening be a routine part of medical care to identify more people who do not know they are HIV infected. This request will increase HIV testing in DSHS settings. Additional cases of HIV will be identified, saving lives and money by linking people to medical care and preventing people from unknowingly spreading the disease. Funds will also support key components in HIV disease intervention – a responsive disease reporting and data collection and analysis system and public health follow up of HIV cases.

Texas is second in the nation in the number of TB cases reported annually. Limitations in the existing TB public health infrastructure create barriers to service delivery, and hinder efforts to adequately prevent and control TB. Funding is requested to develop a comprehensive program that incorporates accountability with delivery of services in DSHS core, regional and local health department TB program infrastructure.

Program Impact

Average cost per laboratory test performed (EF - cumulative)

FY 2010

FY 2011

15.85

15.85

Texas Department of State Health Services

Exceptional Item 13

Community Mental Health - Maintenance of Critical Services at Local Mental Health Authorities

Funding Request

Total (All Funds)

Method of Financing:

General Revenue

GR - Dedicated

Other Funds

Federal Funds

Number of FTEs

	FY 2010	FY 2011	Biennium
Total (All Funds)	\$ 13,400,000	\$ 13,400,000	\$ 26,800,000
Method of Financing:			
General Revenue	13,400,000	13,400,000	26,800,000
GR - Dedicated			-
Other Funds			-
Federal Funds			-
Number of FTEs	-	-	

Request

Through Resiliency and Disease Management, Community Centers have increased administrative efficiencies, implemented utilization and productivity standards to stretch resources, enhanced Patient Assistance Programs to maximize access to medication and tapped local funding to address resource challenges.

Despite efficiency measures, Community Mental Health Centers contend with increasing costs for pharmaceuticals, laboratory and utilities; growing demand; increased need to keep individuals with mental illness out of the criminal justice system; and more Texans seeking mental health services as a result of an improved crisis response system.