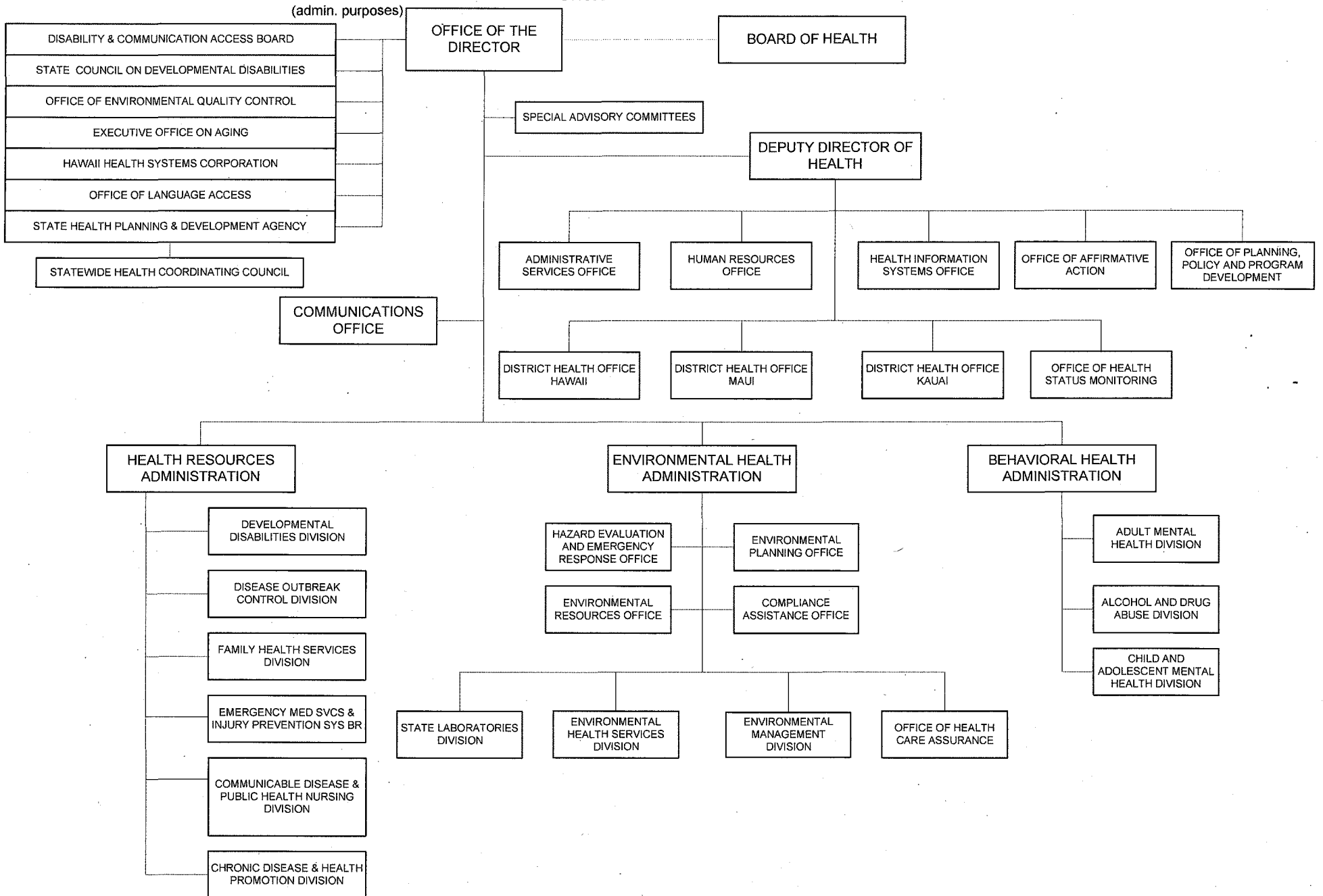




Department of Health

**STATE OF HAWAII
DEPARTMENT OF HEALTH
ORGANIZATION CHART**



DEPARTMENT OF HEALTH

Department Summary

Mission Statement

To administer programs designed to protect, preserve, care for, and improve the physical and mental health of the people of the State.

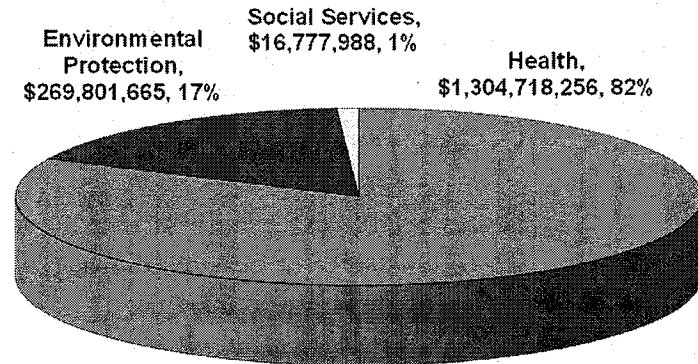
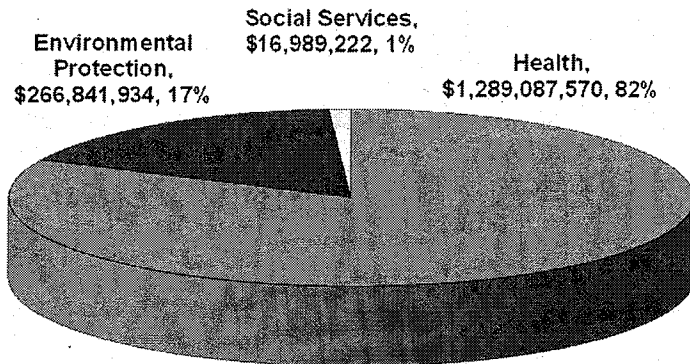
Department Goals

To monitor, protect and enhance the health of all people in Hawaii by providing leadership in assessment, policy development, and assurance to promote health and well-being, to preserve a clean, healthy and natural environment, and to assure basic health care for all.

Significant Measures of Effectiveness

	<u>FY 2016</u>	<u>FY 2017</u>
1. Mortality rate (per thousands)	6	6
2. Average life span of residents (years)	80.5	80.5
3. Percentage of reported vaccine preventable diseases investigated	100%	100%

FB 2015-2017 Operating Budget by Major Program Area
FY 2016 FY 2017



DEPARTMENT OF HEALTH MAJOR FUNCTIONS

- Plans, directs and administers statewide programs to protect, preserve and improve the physical, mental and environmental health of Hawaii's residents.
- Administers programs for the prevention, control and treatment of infectious and communicable diseases; coordinates bioterrorism preparedness planning activities and integrating these activities with surveillance and response mechanisms.
- Administers community based programs that provide and coordinate health intervention services and support for at-risk families, populations and communities who are most likely to experience unhealthy outcomes.
- Provides public health nursing intervention services in the areas of communicable disease, disaster outbreaks care coordination, follow-up and monitoring for at-risk populations and nursing supervision, oversight and intervention in the public schools.
- Plans, coordinates and provides statewide mental health services which include treatment, consultative and preventive components for individuals; also plans, coordinates and implements statewide services relative to alcohol and drug abuse.
- Provides services and support to individuals with developmental disabilities or intellectual disabilities and their families to attain quality of life.
- Plans, provides and promotes health services to mothers, children and youth and family planning services. Also provides basic dental treatment services for the control of oral diseases and abnormalities to institutionalized patients at Hawaii State Hospital, Hale Mohalu, Kalaupapa Settlement and through the four Oahu Health Centers.
- Implements and maintains the statewide programs for air, water, noise, radiation and indoor air pollution control; noise, safe drinking water, solid waste and wastewater management, and programs which protect consumers from unsafe foods, drugs, cosmetics, and medical devices.
- Administers the statewide emergency medical services system.
- Administers a statewide laboratories program which conducts analysis in support of environmental health and communicable disease monitoring and control activities.

MAJOR PROGRAM AREAS

The Department of Health has programs in the following major program areas:

Environmental Protection

HTH 840 Environmental Management
HTH 849 Environmental Health Administration
HTH 850 Office of Environmental Quality Control

Health

HTH 100 Communicable Disease and Public Health
Nursing
HTH 131 Disease Outbreak Control
HTH 210 Hawaii Health Systems Corporation –
Corporate Office
HTH 211 Kahuku Hospital
HTH 212 Hawaii Health Systems Corporation –
Regions
HTH 213 Alii Community Care
HTH 420 Adult Mental Health – Outpatient
HTH 430 Adult Mental Health – Inpatient
HTH 440 Alcohol and Drug Abuse
HTH 460 Child and Adolescent Mental Health
HTH 495 Behavioral Health Administration
HTH 501 Developmental Disabilities
HTH 560 Family Health Services
HTH 590 Chronic Disease Prevention and Health
Promotion
HTH 595 Health Resources Administration
HTH 610 Environmental Health Services
HTH 710 State Laboratory Services

HTH 720 Health Care Assurance
HTH 730 Emergency Medical Services and Injury
Prevention System
HTH 760 Health Status Monitoring
HTH 905 Developmental Disabilities Council
HTH 906 State Health Planning and Development
Agency
HTH 907 General Administration
HTH 908 Office of Language Access

Social Services

HTH 520 Disability and Communication Access
Board
HTH 904 Executive Office on Aging

**Department of Health
(Operating Budget)**

		Budget Base FY 2016	Budget Base FY 2017	FY 2016	FY 2017
Funding Sources:	Positions	2,009.06	2,009.06	2,009.06	2,009.06
General Funds	\$	410,468,415	413,919,270	410,468,415	413,919,270
		164.00	164.00	164.00	164.00
Special Funds		211,969,509	212,255,451	211,719,509	212,005,451
		268.46	268.46	266.46	266.46
Federal Funds		88,082,849	89,073,145	87,164,911	92,023,621
		71.40	71.40	74.40	74.40
Other Federal Funds		39,201,021	39,201,021	47,372,726	51,000,745
		5.00	5.00	5.00	5.00
Interdepartmental Transfers		3,739,241	3,755,575	3,739,241	3,755,575
		77.20	77.20	77.20	77.20
Revolving Funds		169,377,108	169,573,493	169,377,108	169,573,493
		2,595.12	2,595.12	2,596.12	2,596.12
Total Requirements		922,838,143	927,777,955	929,841,910	942,278,155

Major Adjustments in the Executive Budget Request: (general funds unless noted)

1. Trade-off/transfer requests to realign the budget and reflect approved reorganizations for various programs.
2. Adjustments to reflect the change in means of financing between federal funds (major recurring federal funds) and other federal funds.
3. Adjustments to reflect anticipated federal grants and other federal grants.
4. Adds 10.00 temporary other federal fund positions and \$3,050,539 in other federal funds in FY 16 and FY 17 for the Healthy Hawaii Initiative and the Heart Disease and Stroke, Diabetes and Obesity Prevention grants.
5. Increases other federal fund ceiling by \$3,000,000 in FY 17 for the Genetics Services Project for an anticipated five year project.

**Department of Health - Hawaii Health Systems Corporation
(Operating Budget)**

		Budget Base FY 2016	Budget Base FY 2017	FY 2016	FY 2017
Funding Sources:	Positions	-	-	-	-
General Funds	\$	86,440,000	86,440,000	86,440,000	86,440,000
		2,835.25	2,835.25	2,835.25	2,835.25
Special Funds		556,636,816	562,579,754	556,636,816	562,579,754
		2,835.25	2,835.25	2,835.25	2,835.25
Total Requirements		643,076,816	649,019,754	643,076,816	649,019,754

Major Adjustments in the Executive Budget Request: (general funds unless noted)

1. None.

OPERATING AND CAPITAL APPROPRIATIONS

REPORT P61-A

PROGRAM ID:
 PROGRAM STRUCTURE NO.
 PROGRAM TITLE: DEPARTMENT OF HEALTH

PROGRAM EXPENDITURES	IN DOLLARS				IN THOUSANDS			
	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19	FY2019-20	FY2020-21
CURRENT LEASE PAYMENTS								
OTHER CURRENT EXPENSES	14,381,000	14,118,000	12,490,000	10,896,000	10,896	10,896	10,896	10,896
TOTAL CURRENT LEASE PAYMENTS C	14,381,000	14,118,000	12,490,000	10,896,000	10,896	10,896	10,896	10,896
BY MEANS OF FINANCING								
SPECIAL FUND	14,381,000	14,118,000	12,490,000	10,896,000	10,896	10,896	10,896	10,896
OPERATING COST	5,431.37*	5,430.37*	5,431.37*	5,431.37*	5,431.5*	5,431.5*	5,431.5*	5,431.5*
PERSONAL SERVICES	590,589,306	567,069,877	690,614,465	722,787,917	722,788	722,788	722,788	722,788
OTHER CURRENT EXPENSES	943,446,634	943,243,264	868,154,860	855,960,591	855,959	855,959	855,959	855,959
EQUIPMENT	1,676,401	1,656,401	1,659,401	1,653,401	1,654	1,654	1,654	1,654
MOTOR VEHICLE		185,000						
TOTAL OPERATING COST	1,535,712,341	1,512,154,542	1,560,428,726	1,580,401,909	1,580,401	1,580,401	1,580,401	1,580,401
BY MEANS OF FINANCING								
GENERAL FUND	2,010.06*	2,009.06*	2,009.06*	2,009.06*	2,009.1*	2,009.1*	2,009.1*	2,009.1*
	496,645,126	492,193,750	496,908,415	500,359,270	500,360	500,360	500,360	500,360
SPECIAL FUND	2,991.75*	2,999.25*	2,999.25*	2,999.25*	2,999.3*	2,999.3*	2,999.3*	2,999.3*
	738,922,883	722,994,259	755,866,325	763,689,205	763,688	763,688	763,688	763,688
FEDERAL FUNDS	270.46*	268.46*	266.46*	266.46*	266.5*	266.5*	266.5*	266.5*
	87,282,541	85,259,394	87,164,911	92,023,621	92,023	92,023	92,023	92,023
OTHER FEDERAL FUNDS	77.90*	71.40*	74.40*	74.40*	74.4*	74.4*	74.4*	74.4*
	39,638,501	39,201,021	47,372,726	51,000,745	51,003	51,003	51,003	51,003
INTERDEPT. TRANSFER	5.00*	5.00*	5.00*	5.00*	5.0*	5.0*	5.0*	5.0*
	4,673,193	3,693,348	3,739,241	3,755,575	3,754	3,754	3,754	3,754
REVOLVING FUND	76.20*	77.20*	77.20*	77.20*	77.2*	77.2*	77.2*	77.2*
	168,550,097	168,812,770	169,377,108	169,573,493	169,573	169,573	169,573	169,573
CAPITAL INVESTMENT APPROPRIATIONS								
PLANS	2,000	2,203,000	40,000	40,000				
DESIGN	2,353,000	10,058,000	919,000	1,053,000				
CONSTRUCTION	91,923,000	101,688,000	36,045,000	34,079,000				
EQUIPMENT	14,324,000	9,099,000	2,200,000	532,000				

OPERATING AND CAPITAL APPROPRIATIONS

REPORT P61-A

PROGRAM ID:
 PROGRAM STRUCTURE NO.
 PROGRAM TITLE: **DEPARTMENT OF HEALTH**

PROGRAM EXPENDITURES	IN DOLLARS				IN THOUSANDS			
	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19	FY2019-20	FY2020-21
TOTAL CAPITAL APPROPRIATIONS	108,602,000	123,048,000	39,204,000	35,704,000				
BY MEANS OF FINANCING								
G.O. BONDS	88,531,000	67,977,000	19,500,000	16,000,000				
REVENUE BONDS		31,500,000						
FEDERAL FUNDS	20,071,000	23,571,000	19,704,000	19,704,000				
TOTAL POSITIONS	5,431.37*	5,430.37*	5,431.37*	5,431.37*	5,431.50*	5,431.50*	5,431.50*	5,431.50*
TOTAL PROGRAM COST	1,658,695,341	1,649,320,542	1,612,122,726	1,627,001,909	1,591,297	1,591,297	1,591,297	1,591,297

**Department of Health
(Capital Improvements Budget)**

	<u>FY 2016</u>	<u>FY 2017</u>
Funding Sources:		
General Obligation Bonds	7,500,000	4,000,000
Federal Funds	19,704,000	19,704,000
	27,204,000	23,704,000
Total Requirements	27,204,000	23,704,000

Highlights of the Executive CIP Budget Request: (general obligation bonds unless noted)

1. Adds \$2,172,000 and \$10,859,000 in federal funds in FY 16 and FY 17 for Wastewater Treatment Revolving Fund, Statewide.
2. Adds \$1,769,000 and \$8,845,000 in federal funds in FY 16 and FY 17 for Safe Drinking Water Revolving Fund, Statewide.
3. Adds \$3,559,000 in FY 16 and \$59,000 in FY 17 for Department of Health, Health and Safety, Statewide.

**Department of Health - Hawaii Health Systems Corporation
(Capital Improvements Budget)**

	FY 2016	FY 2017
Funding Sources:		
General Obligation Bonds	12,000,000	12,000,000
Total Requirements	12,000,000	12,000,000

Highlights of the Executive CIP Budget Request: (general obligation bonds unless noted)

1. Adds \$12,000,000 in FY 16 and FY 17 for Lump Sum CIP Improvements.

STATE OF HAWAII
PROGRAM ID
PROGRAM STRUCTURE NO.
PROGRAM TITLE

**REQUIRED CAPITAL APPROPRIATIONS - BY CAPITAL PROJECT
IN THOUSANDS OF DOLLARS**

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DEPARTMENT OF HEALTH

PROJECT NUMBER	PRIORITY NUMBER	LOC	SCOPE	PROJECT TITLE	BUDGET PERIOD							SUCCEED YEARS		
					PROJECT TOTAL	PRIOR YRS	FY 13-14	FY 14-15	FY 15-16	FY 16-17	FY 17-18		FY 18-19	FY 19-20
				PLANS	3,511	1,226	2	2,203	40	40				
				LAND	384	384								
				DESIGN	47,356	32,973	2,353	10,058	919	1,053				
				CONSTRUCTION	1,930,916	1,667,181	91,923	101,688	36,045	34,079				
				EQUIPMENT	47,042	20,887	14,324	9,099	2,200	532				
				TOTAL	2,029,209	1,722,651	108,602	123,048	39,204	35,704				
				G.O. BONDS	867,819	675,811	88,531	67,977	19,500	16,000				
				REVENUE BONDS	31,500			31,500						
				FEDERAL FUNDS	1,129,890	1,046,840	20,071	23,571	19,704	19,704				



Operating Budget Details

OPERATING AND CAPITAL APPROPRIATIONS

REPORT P61-A

PROGRAM ID:
 PROGRAM STRUCTURE NO. 04
 PROGRAM TITLE: ENVIRONMENTAL PROTECTION

PROGRAM EXPENDITURES	IN DOLLARS				IN THOUSANDS			
	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19	FY2019-20	FY2020-21
OPERATING COST	254.00*	258.00*	260.00*	260.00*	260.0*	260.0*	260.0*	260.0*
PERSONAL SERVICES	17,933,372	19,098,500	21,462,475	22,183,021	22,181	22,181	22,181	22,181
OTHER CURRENT EXPENSES	248,200,439	246,418,934	245,016,694	247,255,879	247,257	247,257	247,257	247,257
EQUIPMENT	378,765	362,765	362,765	362,765	363	363	363	363
TOTAL OPERATING COST	266,512,576	265,880,199	266,841,934	269,801,665	269,801	269,801	269,801	269,801
BY MEANS OF FINANCING								
GENERAL FUND	51.00*	52.00*	52.00*	52.00*	52.0*	52.0*	52.0*	52.0*
	4,192,578	4,257,558	4,251,202	4,374,108	4,375	4,375	4,375	4,375
	64.50*	67.50*	67.50*	67.50*	67.5*	67.5*	67.5*	67.5*
SPECIAL FUND	81,116,505	81,109,457	81,561,553	81,711,907	81,711	81,711	81,711	81,711
	43.30*	42.30*	41.30*	41.30*	41.3*	41.3*	41.3*	41.3*
FEDERAL FUNDS	8,289,277	7,541,623	6,824,931	9,504,486	9,504	9,504	9,504	9,504
	17.00*	17.00*	20.00*	20.00*	20.0*	20.0*	20.0*	20.0*
OTHER FEDERAL FUNDS	4,189,665	3,984,337	4,652,686	4,463,217	4,464	4,464	4,464	4,464
	2.00*	2.00*	2.00*	2.00*	2.0*	2.0*	2.0*	2.0*
INTERDEPT. TRANSFER	174,454	174,454	174,454	174,454	174	174	174	174
	76.20*	77.20*	77.20*	77.20*	77.2*	77.2*	77.2*	77.2*
REVOLVING FUND	168,550,097	168,812,770	169,377,108	169,573,493	169,573	169,573	169,573	169,573
CAPITAL INVESTMENT APPROPRIATIONS								
CONSTRUCTION	24,096,000	24,096,000	23,645,000	23,645,000				
TOTAL CAPITAL APPROPRIATIONS	24,096,000	24,096,000	23,645,000	23,645,000				
BY MEANS OF FINANCING								
G.O. BONDS	4,025,000	4,025,000	3,941,000	3,941,000				
FEDERAL FUNDS	20,071,000	20,071,000	19,704,000	19,704,000				
TOTAL POSITIONS	254.00*	258.00*	260.00*	260.00*	260.00*	260.00*	260.00*	260.00*
TOTAL PROGRAM COST	290,608,576	289,976,199	290,486,934	293,446,665	269,801	269,801	269,801	269,801

OPERATING AND CAPITAL APPROPRIATIONS

REPORT P61-A

PROGRAM ID: **HTH840**
 PROGRAM STRUCTURE NO. **040101**
 PROGRAM TITLE: **ENVIRONMENTAL MANAGEMENT**

PROGRAM EXPENDITURES	IN DOLLARS				IN THOUSANDS			
	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19	FY2019-20	FY2020-21
OPERATING COST	198.00*	202.00*	202.00*	202.00*	202.00*	202.00*	202.00*	202.00*
PERSONAL SERVICES	13,410,054	14,356,618	16,288,846	16,826,943	16,825	16,825	16,825	16,825
OTHER CURRENT EXPENSES	243,688,176	242,429,287	241,255,906	243,737,091	243,738	243,738	243,738	243,738
EQUIPMENT	369,765	353,765	353,765	353,765	354	354	354	354
TOTAL OPERATING COST	257,467,995	257,139,670	257,898,517	260,917,799	260,917	260,917	260,917	260,917
BY MEANS OF FINANCING								
GENERAL FUND	36.00*	37.00*	37.00*	37.00*	37.00*	37.00*	37.00*	37.00*
2,604,474	2,669,454	2,911,485	3,001,102	3,002	3,002	3,002	3,002	
64.00*	67.00*	67.00*	67.00*	67.00*	67.00*	67.00*	67.00*	
SPECIAL FUND	81,068,234	81,061,186	81,513,282	81,663,636	81,663	81,663	81,663	81,663
37.80*	36.80*	35.80*	35.80*	35.80*	35.8*	35.8*	35.8*	35.8*
FEDERAL FUNDS	7,709,657	6,962,003	6,121,680	8,746,112	8,746	8,746	8,746	8,746
8.00*	8.00*	9.00*	9.00*	9.00*	9.00*	9.00*	9.00*	9.00*
OTHER FEDERAL FUNDS	1,588,478	1,588,478	2,046,000	2,046,000	2,046	2,046	2,046	2,046
2.00*	2.00*	2.00*	2.00*	2.00*	2.00*	2.00*	2.00*	2.00*
INTERDEPT. TRANSFER	174,454	174,454	174,454	174,454	174	174	174	174
50.20*	51.20*	51.20*	51.20*	51.20*	51.2*	51.2*	51.2*	51.2*
REVOLVING FUND	164,322,698	164,684,095	165,131,616	165,286,495	165,286	165,286	165,286	165,286
CAPITAL INVESTMENT APPROPRIATIONS								
CONSTRUCTION	24,096,000	24,096,000	23,645,000	23,645,000				
TOTAL CAPITAL APPROPRIATIONS	24,096,000	24,096,000	23,645,000	23,645,000				
BY MEANS OF FINANCING								
G.O. BONDS	4,025,000	4,025,000	3,941,000	3,941,000				
FEDERAL FUNDS	20,071,000	20,071,000	19,704,000	19,704,000				
TOTAL POSITIONS	198.00*	202.00*	202.00*	202.00*	202.00*	202.00*	202.00*	202.00*
TOTAL PROGRAM COST	281,563,995	281,235,670	281,543,517	284,562,799	260,917	260,917	260,917	260,917

PROGRAM ID: HTH840
 PROGRAM STRUCTURE: 040101
 PROGRAM TITLE: ENVIRONMENTAL MANAGEMENT

	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21
MEASURES OF EFFECTIVENESS								
1. % COVERED SOURCES IN COMPL WAIR RULES/PERMITS	92	92	92	92	92	92	92	92
2. % WASTEWTR EFFL/BIOSOLIDS REUSED FOR BENEF PURPS	16	16	16	16	16	16	16	16
3. % WASTEWATER DISCHARGERS IN COMPLIANCE W/PERMITS	95	96	96	96	96	96	96	96
4. % OF MARINE RECREATIONAL SITES IN COMPL WITH RULES	99	99	99	99	99	99	99	99
5. % PUBLIC DRINKING WATER SYS MEETING HEALTH STNDRDS	94	94	94	94	94	94	94	94
6. % INJECTION WELL FACILITIES WITH A UIC PERMIT	59	59	59	59	59	59	59	59
7. % SOLID & HAZARDOUS WASTE FACILITIES IN COMPLIANCE	66	66	66	66	66	66	66	66
8. % UNDERGRND STORAGE TANK FACILITIES IN COMPLIANCE	90	90	90	90	90	90	90	90
9. % OF WASTEWATER REVOLVING FUNDS LOANED	87	90	90	90	90	90	90	90
10. % OF WASTEWATER SYSTEMS IN COMPLIANCE WITH RULES	89	89	89	89	89	89	89	89
PROGRAM TARGET GROUPS								
1. # OF COVERED AIR POLLUTION SOURCES	149	150	150	150	150	150	150	150
2. # EXSTG TRTMT WORKS PRODCNG RECLAIMD WTR/BIOSOLIDS	37	37	37	37	37	37	37	37
3. # OF MAJOR AND MINOR WASTEWATER DISCHARGERS	69	70	70	70	70	70	70	70
4. # OF MARINE RECREATIONAL SITES	147	147	147	147	147	147	147	147
5. # OF PUBLIC DRINKING WATER SYSTEMS	133	133	133	133	133	133	133	133
6. # OF UNDERGROUND INJECTION WELL FACILITIES	1350	1355	1355	1355	1355	1355	1355	1355
7. # OF SOLID AND HAZARDOUS WASTE FACILITIES	446	446	446	446	446	446	446	446
8. # UNDERGROUND STORAGE TANK FACILITIES REGISTERED	3217	3210	3210	3210	3210	3210	3210	3210
9. # OF WASTEWATER REVOLVING FUND LOANS MADE	6	10	10	10	10	10	10	10
10. # EXISTG TRTMT WKS & TRTMT INDIV WASTEWTR SYSTEMS	36575	38000	38000	38000	38000	38000	38000	38000
PROGRAM ACTIVITIES								
1. # INSPECTIONS OF COVERED AIR POLLUTION SOURCES	140	140	140	142	144	146	148	150
2. # OF INDIV WW SYS/BLDG PERMIT APPS REVWD/APPRVD	4821	4800	4800	4800	4800	4800	4800	4800
3. # OPER/MAINT/COMPLNT INSPECTNS OF WASTEWTR DISCHRS	312	300	300	300	300	300	300	300
4. # OF MICROBIOL/CHEM ANALYSES FOR MARINE WATER QUAL	6245	6200	6200	6200	6200	6200	6200	6200
5. # OF SANITARY SURVEYS CONDUCTED	26	26	26	26	26	26	26	26
6. # OF INJECTION WELL APPLICATIONS PROCESSED	108	79	80	80	80	80	80	80
7. # OF SOLID/HAZ WASTE FACIL INSPECTED/INVESTIGATED	100	100	100	100	100	100	100	100
8. # OF UNDERGROUND STORAGE TANK FACIL EVAL/INSPECTED	500	500	500	500	500	500	500	500
9. # OF NEW CONSTRUCTION LOANS ISSUED	6	10	10	10	10	10	10	10
10. # OP/MAINT/CONST INSP/ENF ACT/INVSTGTNS AT WW FAC	1431	1500	1500	1500	1500	1500	1500	1500
PROGRAM REVENUES BY TYPE (IN THOUSANDS of DOLLARS)								
LICENSES, PERMITS, AND FEES	174	174	174	174	174	174	174	174
REVENUES FROM THE USE OF MONEY AND PROPERTY	3,076	2,709	2,418	2,138	1,887	1,652	1,450	1,450
REVENUE FROM OTHER AGENCIES: FEDERAL	25,689	26,608	26,303	26,302	26,302	26,302	26,302	26,302
CHARGES FOR CURRENT SERVICES	67,503	67,016	66,755	66,469	66,246	66,019	65,798	65,798
FINES, FORFEITS AND PENALTIES	520	520	520	520	520	520	520	520
NON-REVENUE RECEIPTS	33,327	29,665	29,331	28,293	28,001	27,015	24,915	24,915
TOTAL PROGRAM REVENUES	130,289	126,692	125,501	123,896	123,130	121,682	119,159	119,159
PROGRAM REVENUES BY FUND (IN THOUSANDS of DOLLARS)								
GENERAL FUNDS	296	296	296	296	296	296	296	296
SPECIAL FUNDS	68,853	70,026	70,017	70,025	70,016	70,025	70,016	70,016
ALL OTHER FUNDS	61,140	56,370	55,188	53,575	52,818	51,361	48,847	48,847
TOTAL PROGRAM REVENUES	130,289	126,692	125,501	123,896	123,130	121,682	119,159	119,159

NOTE: PROGRAM REVENUES BY TYPE AND FUND MAY NOT BE ACCURATE DUE TO SYSTEM ERROR.

A. Statement of Program Objectives

To preserve and enhance environmental quality as it relates to human and ecological health in Hawaii.

B. Description of Request and Compliance with Section 37-68(1)(A)(B)

1. Change the means of financing (MOF) from federal funds (N) to other federal funds (P) per Finance Memorandum (FM) 12-12 as amended by FM 12-14. The PM 2.5 Monitoring Network grant in HTH 840/FF, Clean Air Branch, is not on the FFIS list. (-1.00/- \$210,000 N; -1.00/- \$210,000 N), (1.00/\$210,000 P; 1.00/\$210,000 P).
2. Adjust federal fund ceiling per Form FF estimates of federal grant award amounts for HTH 840/FJ, Solid and Hazardous Waste Branch (0.00/\$247,522 P; 0.00/\$247,522 P).
3. Adjust federal fund ceiling per Form FF estimates of federal grant award amounts for HTH 840/FG, Clean Water Branch (0.00/- \$1,051,003 N; 0.00/\$1,434,997 N).
4. Various tradeoff/transfer to fully fund positions (0.00/\$0 in special funds (B); 0.00/\$0 B); (0.00/\$0 N; 0.00/\$0 N); (0.00/\$0 in revolving funds (W); 0.00/\$0 W).
5. CIP request for Wastewater Treatment Revolving Fund for Pollution Control, Statewide, Project No. 840161, \$2,172,000 in general obligation bond funds (C)/\$10,859,000 N in FY16 and \$2,172,000 C/ \$10,859,000 N in FY17.
6. CIP request for Safe Drinking Water Revolving Fund, Statewide, Project No. 840162, \$1,769,000 C/ \$8,845,000 N in FY16; and \$1,769,000 C/ \$8,845,000 N) in FY17.

C. Description of Activities Performed

1. Technical Review: Evaluate the actual or potential for environmental pollution from natural and man-made sources and administer the State's wastewater and drinking water facilities construction and improvement programs.
2. Permitting: Issue permits for the control of air, water, and underground discharges and for solid waste management and disposal.
3. Monitoring and Inspection: Monitor and evaluate the effects of pollutants on ambient conditions throughout the state.
4. Investigation and Enforcement: Investigate complaints, inspect sources, and initiate appropriate action to correct violations.
5. Other: Provide technical assistance to various private and public agencies.
6. Emergency preparedness: Prepare for and guard against pollution caused by both natural and man-made disasters, particularly waste and chemical spills that may have catastrophic impact on drinking water, streams and near-shore resources, and the air we breathe.

D. Statement of Key Policies Pursued

The major strategy in environmental management is the use of regulatory power to force compliance by dischargers to standards set by the Department of Health. The Department's policy has been to use permits and variances as the principal mechanism, working with dischargers to set schedules for compliance and utilizing enforcement actions for major dischargers. The water pollution control strategy is to attack water pollution in the areas where it is serious and where it results from the discharge from point sources and controllable nonpoint sources. The overall air pollution strategy is to maintain control over stationary sources. A new direction is to develop a greenhouse gas program to attain desired thresholds in the state's air quality. In solid waste management, departmental policy is to continually upgrade facilities

through regulation and technical assistance to meet environmental standards and to encourage recycling and resource recovery. The hazardous waste management program strategy is to assure that generators either 1) recover their wastes for reuse or 2) dispose of their wastes by permitted incineration or by shipping out-of-state for disposal in a federally-permitted facility. The safe drinking water program conducts surveillance, monitoring, and enforcement to insure that water purveyors are providing safe drinking water that is in compliance with applicable standards. The program also provides low-cost construction loans. The wastewater treatment program prevents pollution through permitting and construction loan activities.

E. Identification of Important Program Relationships

1. Intradepartmental: The State Laboratories Division of the Department of Health provides laboratory support for the pollution control programs, including analyses of samples and the preparation of laboratory reports.
2. Interagency: The major interagency relationship is with the U.S. Environmental Protection Agency (EPA), which provides guidelines and funding for thirteen cooperative agreement programs. At the State level, programs are coordinated with the Department of Land and Natural Resources, Department of Transportation, Department of Agriculture, Department of Business, Economic Development, and Tourism, and Department of the Attorney General.

F. Description of Major External Trends Affecting the Program

The federal government, through various laws enacted by Congress, has a major effect on the State environmental management programs by mandating minimum requirements without adequate funding.

G. Discussion of Cost, Effectiveness, and Program Size Data

Extensive federal legislation in environmental protection, often without funding, and increasing federal efforts to delegate programs to the State have resulted in extensive prioritizing in order to accomplish desired goals.

H. Discussion of Program Revenues

The major source of income for this program is federal grants administered by the EPA and funded pursuant to the federal Water Pollution Control Act, Clean Air Act, Resource Conservation and Recovery Act, and the Safe Drinking Water Act. Revenue sources for the Clean Water State Revolving Fund and the Drinking Water State Revolving Fund each include loan repayments, fees, interest, federal capitalization grants, and capital projects funds. Permit fees for air pollution sources are deposited to the Clean Air Special Fund. Solid waste management surcharges and advance glass disposal fees are deposited to the Environmental Management Special Fund. Deposit beverage container fees and deposits accrue to the Deposit Beverage Container Special Fund, with the deposits paid out to recyclers. Registration fees from electronic device manufacturers are deposited to the Electronic Device Recycling Fund. Fees from enforcement actions involving leaking underground storage tanks are deposited to the Leaking Underground Storage Tank Revolving Fund. Certification fees for wastewater treatment plant operators accrue to the Wastewater Treatment Certification Board Special Fund.

Several environmental management programs depend on revenue in the Environmental Response Revolving Fund (ERRF) to provide operating funds. Major sources of revenue for ERRF include a portion of the Environmental Response, Energy, and Food Security Tax, and fines for violation of environmental regulations. The current fund balance for the ERRF is dangerously low. Over the past several years, Hawaii has imported fewer

barrels of oil as it relies more heavily on renewable energy, which in turn has decreased the amount of income from the barrel tax to the ERRF at the rate of about 5% per year. Demand for hazard evaluation and response has increased in recent years due to events such as Hurricane Iselle, Puna lava flows, Red Hill fuel storage leak, Tohoku earthquake and tsunami, and the Honolulu Harbor molasses spill. In addition, staff salaries have increased dramatically as a result of recent collective bargaining agreements and estimated fringe benefit increases.

I. Summary of Analysis Performed

Not applicable.

J. Further Considerations

None.

OPERATING AND CAPITAL APPROPRIATIONS

REPORT P61-A

PROGRAM ID: HTH850
 PROGRAM STRUCTURE NO. 040301
 PROGRAM TITLE: OFFICE OF ENVIRONMENTAL QUALITY CONTROL

PROGRAM EXPENDITURES	IN DOLLARS				IN THOUSANDS			
	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19	FY2019-20	FY2020-21
OPERATING COST	5.00*	5.00*	5.00*	5.00*	5.0*	5.0*	5.0*	5.0*
PERSONAL SERVICES	294,485	294,485	323,579	332,954	333	333	333	333
OTHER CURRENT EXPENSES	50,003	50,003	50,003	50,003	50	50	50	50
TOTAL OPERATING COST	344,488	344,488	373,582	382,957	383	383	383	383
BY MEANS OF FINANCING								
GENERAL FUND	5.00*	5.00*	5.00*	5.00*	5.0*	5.0*	5.0*	5.0*
	344,488	344,488	373,582	382,957	383	383	383	383
TOTAL POSITIONS	5.00*	5.00*	5.00*	5.00*	5.00*	5.00*	5.00*	5.00*
TOTAL PROGRAM COST	344,488	344,488	373,582	382,957	383	383	383	383

PROGRAM ID: HTH850
 PROGRAM STRUCTURE: 040301
 PROGRAM TITLE: OFFICE OF ENVIRONMENTAL QUALITY CONTROL

	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21
MEASURES OF EFFECTIVENESS								
1. % EA/EIS PUBLISHD FOR PUBLIC NOTIF ON TIME/SCHEDUL	100	100	100	100	100	100	100	100
2. % INCR IN READERSHIP/CIRCULATION OF THE ENV NOTICE	25	25	25	10	10	10	10	10
3. % SUBMTD STUDIES RCV CRITICAL RVW/COMMENT BY STAFF	15	20	40	50	60	70	80	80
4. % STATE AG PREP/PROC HRS 343 DOCS W/OEQC TRAIN STF	15	40	50	60	70	80	90	90
PROGRAM TARGET GROUPS								
1. HAWAII DEFACTO POPULATION	1309000	1309000	1309000	1309000	1309000	1309000	1309000	1309000
2. STATE AGENCY EMPLOYEES THAT PREP/PROC HRS 343 DOCS	2000	2000	2000	2000	2000	2000	2000	2000
3. PLANNERS/CONSULTANTS/PUBLIC THAT PREP HRS 343 DOCS	3500	3500	3500	3500	3500	3500	3500	3500
PROGRAM ACTIVITIES								
1. # POLICIES ON ENV ISSUES DEVELOPD FOR GOVERNOR/LEG	10	10	10	10	10	10	10	10
2. # EA/EIS REVIEWED	150	150	150	150	150	150	150	150
3. # ENV EDUCATION PROJECTS & WORKSHOPS CONDUCTED	10	10	10	10	10	10	10	10
4. # INDIV SUBSCRIBED TO THE ENVIRONMENTAL NOTICE	100	140	200	300	400	500	600	700
5. # OF MEETINGS HELD BY THE ENVIRONMENTAL COUNCIL	11	11	11	11	11	11	11	11
6. # EXEMPTION LISTS REVIEWD/APPROVD BY ENV COUNCIL	0	5	15	15	15	15	10	10

NOTE: PROGRAM REVENUES BY TYPE AND FUND MAY NOT BE ACCURATE DUE TO SYSTEM ERROR.

A. Statement of Program Objectives

To assist in restoring, protecting and enhancing the natural physical environment of the State by stimulating, expanding, and coordinating efforts of governmental agencies, industrial groups and citizens.

B. Description of Request and Compliance with Section 37-68 (1)(A)(B)

None.

C. Description of Activities Performed

Program objectives include implementation of Chapter 341, Hawaii Revised Statutes (HRS). This includes public education programs through the University of Hawaii Environmental Center; conduct research; encourage public acceptance of proposed legislative and administrative actions concerning ecology and environmental quality through the Environmental Council; through legislation preserve and enhance the environmental quality of the State; and offer advice and assistance to private industry, governmental agencies, or other persons upon request.

D. Statement of Key Policies Pursued

The key policies which govern this program are those found under Chapter 341 and 343, HRS. These policies contend that Hawaii's environment and economy are of equal importance, and the environment shall receive full consideration in all actions or decisions which may affect it. The environmental impact statement process and the Environmental Council assure that the economic, physical, social, cultural, and other benefits and impacts of proposed actions are identified and assessed.

The Office of Environmental Quality Control (OEQC) also initiates new environmental activities and informs agencies and the public about viable means of protecting, conserving, or reusing valuable natural and man-made resources. In addition, the OEQC is committed to collaborative and cooperative working relations with other agencies to improve and streamline environmental protection efforts.

E. Identification of Important Program Relationships

Program relationships extend to every agency of State and County government, as well as the Federal agencies. All actions with environmental impact fall within the OEQC's purview. This extends to private industry, citizens and organizations. Within the State government, the environmental aspects of each agency's actions are subject to the OEQC's guidance and coordination, and when requested by the Governor, direction by the OEQC.

F. Description of Major External Trends Affecting the Program

External trends, which affect this program includes: 1) recent court cases that reaffirmed the requirements of Chapter 343, HRS to the development process; 2) the state of the economy; and 3) the increasing awareness of citizens on matters relating to the environment.

G. Discussion of Cost, Effectiveness, and Program Size Data

The scope of the OEQC's program effort is exceedingly broad. Existing staff levels all strive to fulfill the mandate provided in HRS 343 to administer the environmental review system. The disclosure process is to inform all citizens of projects and their effect on the environment, economic development, social and cultural impacts.

H. Discussion of Program Revenue

None.

I. Summary of Analysis Performed

None.

J. Further Considerations

None.

OPERATING AND CAPITAL APPROPRIATIONS

REPORT P61-A

PROGRAM ID: **HTH849**
 PROGRAM STRUCTURE NO. **040303**
 PROGRAM TITLE: **ENVIRONMENTAL HEALTH ADMINISTRATION**

PROGRAM EXPENDITURES	IN DOLLARS				IN THOUSANDS			
	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19	FY2019-20	FY2020-21
OPERATING COST	51.00*	51.00*	53.00*	53.00*	53.0*	53.0*	53.0*	53.0*
PERSONAL SERVICES	4,228,833	4,447,397	4,850,050	5,023,124	5,023	5,023	5,023	5,023
OTHER CURRENT EXPENSES	4,462,260	3,939,644	3,710,785	3,468,785	3,469	3,469	3,469	3,469
EQUIPMENT	9,000	9,000	9,000	9,000	9	9	9	9
TOTAL OPERATING COST	8,700,093	8,396,041	8,569,835	8,500,909	8,501	8,501	8,501	8,501
BY MEANS OF FINANCING								
GENERAL FUND	10.00*	10.00*	10.00*	10.00*	10.0*	10.0*	10.0*	10.0*
	1,243,616	1,243,616	966,135	990,049	990	990	990	990
	.50*	.50*	.50*	.50*	.5*	.5*	.5*	.5*
SPECIAL FUND	48,271	48,271	48,271	48,271	48	48	48	48
	5.50*	5.50*	5.50*	5.50*	5.5*	5.5*	5.5*	5.5*
FEDERAL FUNDS	579,620	579,620	703,251	758,374	758	758	758	758
	9.00*	9.00*	11.00*	11.00*	11.0*	11.0*	11.0*	11.0*
OTHER FEDERAL FUNDS	2,601,187	2,395,859	2,606,686	2,417,217	2,418	2,418	2,418	2,418
	26.00*	26.00*	26.00*	26.00*	26.0*	26.0*	26.0*	26.0*
REVOLVING FUND	4,227,399	4,128,675	4,245,492	4,286,998	4,287	4,287	4,287	4,287
TOTAL POSITIONS	51.00*	51.00*	53.00*	53.00*	53.00*	53.00*	53.00*	53.00*
TOTAL PROGRAM COST	8,700,093	8,396,041	8,569,835	8,500,909	8,501	8,501	8,501	8,501

PROGRAM ID: HTH849
 PROGRAM STRUCTURE: 040303
 PROGRAM TITLE: ENVIRONMENTAL HEALTH ADMINISTRATION

	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21
MEASURES OF EFFECTIVENESS								
1. % OIL/CHEM/HAZ SPILL RESPONSES/CLEANUPS INVESTGTD	9	14	14	14	14	14	14	14
2. % OF COMPLETE CHEMICAL INVENTORIES REPORTED	101	100	100	100	100	100	100	100
3. % OF TARGET GROUP THAT HAS BEEN ASSISTED	13	16	16	16	16	16	16	16
PROGRAM TARGET GROUPS								
1. # OF OIL/CHEMICAL/HAZARDOUS MATERIAL SPILLS	390	400	400	400	400	400	400	400
2. # KNOWN FACIL REQUIRED TO REPORT CHEM INVENTORIES	900	900	900	900	900	900	900	900
3. # PERSONS AFFECTED BY/OR INQ ABOUT ENVIRON HAZARDS	100000	100000	100000	100000	100000	100000	100000	100000
PROGRAM ACTIVITIES								
1. # OIL/CHEM/HAZARD MATERIAL SPILLS INVESTIGATED	34	34	34	34	34	34	34	34
2. # OF FACIL REPRPNG COMPLETE CHEMICAL INVENTORIES	912	912	912	912	912	912	912	912
3. # INVESTIG/RESPONSES TO RPTS OF ENV ILLNESS/INJURY	12766	12766	12766	12766	12766	12766	12766	12766
PROGRAM REVENUES BY TYPE (IN THOUSANDS of DOLLARS)								
TAXES	1,290	1,290	1,290	1,290	1,290	1,290	1,290	1,290
REVENUE FROM OTHER AGENCIES: FEDERAL	2,590	2,540	2,389	2,088	1,984	1,984	1,984	1,984
CHARGES FOR CURRENT SERVICES	77	77	77	77	77	77	77	77
FINES, FORFEITS AND PENALTIES	585	585	585	585	585	585	585	585
TOTAL PROGRAM REVENUES	4,542	4,492	4,341	4,040	3,936	3,936	3,936	3,936
PROGRAM REVENUES BY FUND (IN THOUSANDS of DOLLARS)								
SPECIAL FUNDS	354	304	404	104				
ALL OTHER FUNDS	4,188	4,188	3,937	3,936	3,936	3,936	3,936	3,936
TOTAL PROGRAM REVENUES	4,542	4,492	4,341	4,040	3,936	3,936	3,936	3,936

NOTE: PROGRAM REVENUES BY TYPE AND FUND MAY NOT BE ACCURATE DUE TO SYSTEM ERROR.

A. Statement of Program Objectives

To formulate environmental policy; direct operations and personnel; and provide other administrative, planning, hazard evaluation, and emergency response services.

B. Description of Request and Compliance with Section 37-68(1)(A)(B)

1. Add one (1.00) Information Technology Specialist V position in HTH 849/FA, Deputy Director, to manage, coordinate, and sustain all new and ongoing data management system activities in Environmental Health Administration; funded by Exchange Network grant (1.00/\$49,102 in other federal funds (P); 1.00/\$101,633 P).
2. Add one (1.00) Office Assistant III position in HTH 849/FD, Hazard Evaluation and Emergency Response Office, to support State Response Program grant activities (1.00/\$40,584 P; 1.00/\$40,584 P).
3. Adjust federal fund ceiling per Form FF estimates of federal grant award amounts for HTH 849/FD, Hazard Evaluation and Emergency Response Office (0.00/\$121,141 P; 0.00/- \$120,859 P).

C. Description of Activities Performed

1. Administration: Establish and implement policies for environmental programs to prevent and/or reduce to acceptable levels environmental pollution and to protect the community from unsanitary or hazardous conditions.
2. Planning: Provide short- and long-term planning, information management, and program evaluation services for all programs in the Environmental Health Administration.

3. Hazard Evaluation and Emergency Response: Provide the evaluation and surveillance of environmental hazards and emergency and other response to and remediation of environmental agents.

4. Resource Control: Plan, direct, and review fiscal and personnel planning, programming, and budgeting activities for the Environmental Health Administration.

D. Statement of Key Policies Pursued

Environmental Health Administration (EHA) policies are discussed in the Department's Environmental Management, HTH 840, Environmental Health Services, HTH 610, and State Laboratory Services, HTH 710. In addition to the above, EHA establishes policy for all environmental programs, provides administrative services, develops new programs, and provides response to environmental emergencies.

E. Identification of Important Program Relationships

1. Intradepartmental

The State Laboratories Division (SLD) of the Department of Health provides laboratory support for the environmental programs, disease outbreak, and communicable disease programs, including analyses of samples and the preparation of laboratory reports.

2. Interagency

The primary interagency relationship is with the U.S. Environmental Protection Agency, which provides guidelines and funding for twenty cooperative programs throughout EHA. The U.S. Department of

Transportation and the U.S. Department of Defense also provide grant funding. The U.S. Food and Drug Administration provides guidelines for the more traditional public health programs. The SLD works with the U.S. Centers for Disease Control and other federal agencies. Close interagency relationships are maintained with the State Department of Transportation, Department of Land and Natural Resources, Department of Agriculture, Department of Business, Economic Development, and Tourism, and Department of the Attorney General.

F. Description of Major External Trends Affecting the Program

The Federal government, through various laws enacted by Congress, has a major effect on the State environmental programs due to the enactment of new programs and the revision of requirements for existing programs. These changes include the establishment of minimum requirements without increased funding. Anti-terrorism needs are now a serious element.

G. Discussion of Cost, Effectiveness, and Program Size Data

Extensive federal legislation in the area of environmental protection, often without funding, and increasing federal efforts to delegate programs to the State have resulted in extensive prioritizing in order to accomplish desired goals.

H. Discussion of Program Revenue

The Federal grants continue to be the main source of outside revenue for the programs. Other sources of income include a portion of the Environmental Response, Energy, and Food Security Tax, fines for violation of environmental regulations, filing fees for chemical inventories, and fees related to the Voluntary Response Program. These revenue sources are deposited into the Environmental Response Revolving Fund (ERRF).

The current fund balance for the ERRF is dangerously low. Over the past several years, Hawaii has imported fewer barrels of oil as it relies more heavily on renewable energy, which in turn has decreased the amount of income from the barrel tax to the ERRF at the rate of about 5% per year. Demand for hazard evaluation and response has increased in recent years due to events such as Hurricane Iselle, Puna lava flows, Red Hill fuel storage leak, Tohoku earthquake and tsunami, and the Honolulu Harbor molasses spill. In addition, staff salaries have increased dramatically as a result of recent collective bargaining agreements and estimated fringe benefit increases.

I. Summary of Analysis Performed

Not applicable.

J. Further Considerations

None.

OPERATING AND CAPITAL APPROPRIATIONS

REPORT P61-A

PROGRAM ID:
PROGRAM STRUCTURE NO. **05**
PROGRAM TITLE: **HEALTH**

PROGRAM EXPENDITURES	IN DOLLARS				IN THOUSANDS			
	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19	FY2019-20	FY2020-21
CURRENT LEASE PAYMENTS								
OTHER CURRENT EXPENSES	14,381,000	14,118,000	12,490,000	10,896,000	10,896	10,896	10,896	10,896
TOTAL CURRENT LEASE PAYMENTS C	14,381,000	14,118,000	12,490,000	10,896,000	10,896	10,896	10,896	10,896
BY MEANS OF FINANCING								
SPECIAL FUND	14,381,000	14,118,000	12,490,000	10,896,000	10,896	10,896	10,896	10,896
OPERATING COST	5,156.37*	5,151.37*	5,150.37*	5,150.37*	5,150.5*	5,150.5*	5,150.5*	5,150.5*
PERSONAL SERVICES	570,335,526	545,650,969	666,414,847	697,974,319	697,976	697,976	697,976	697,976
OTHER CURRENT EXPENSES	680,386,320	682,077,969	608,886,087	594,557,301	594,554	594,554	594,554	594,554
EQUIPMENT	1,297,636	1,293,636	1,296,636	1,290,636	1,291	1,291	1,291	1,291
MOTOR VEHICLE		185,000						
TOTAL OPERATING COST	1,252,019,482	1,229,207,574	1,276,597,570	1,293,822,256	1,293,821	1,293,821	1,293,821	1,293,821
BY MEANS OF FINANCING								
GENERAL FUND	1,948.32*	1,946.32*	1,946.32*	1,946.32*	1,946.4*	1,946.4*	1,946.4*	1,946.4*
	483,138,521	479,054,165	483,980,728	487,270,472	487,270	487,270	487,270	487,270
	2,927.25*	2,931.75*	2,931.75*	2,931.75*	2,931.8*	2,931.8*	2,931.8*	2,931.8*
SPECIAL FUND	657,796,378	641,874,802	674,294,772	681,967,298	681,967	681,967	681,967	681,967
	218.90*	217.90*	216.90*	216.90*	216.9*	216.9*	216.9*	216.9*
FEDERAL FUNDS	71,983,024	70,812,064	73,282,940	75,425,495	75,425	75,425	75,425	75,425
	60.90*	54.40*	54.40*	54.40*	54.4*	54.4*	54.4*	54.4*
OTHER FEDERAL FUNDS	34,856,158	34,200,987	41,747,754	45,858,718	45,860	45,860	45,860	45,860
	1.00*	1.00*	1.00*	1.00*	1.0*	1.0*	1.0*	1.0*
INTERDEPT. TRANSFER	4,245,401	3,265,556	3,291,376	3,300,273	3,299	3,299	3,299	3,299
CAPITAL INVESTMENT APPROPRIATIONS								
PLANS	2,000	2,202,000	40,000	40,000				
DESIGN	2,353,000	10,058,000	919,000	1,053,000				
CONSTRUCTION	67,548,000	77,143,000	12,400,000	10,434,000				
EQUIPMENT	14,323,000	9,059,000	2,200,000	532,000				
TOTAL CAPITAL APPROPRIATIONS	84,226,000	98,462,000	15,559,000	12,059,000				
BY MEANS OF FINANCING								
G.O. BONDS	84,226,000	63,462,000	15,559,000	12,059,000				

OPERATING AND CAPITAL APPROPRIATIONS

REPORT P61-A

PROGRAM ID:
 PROGRAM STRUCTURE NO. **05**
 PROGRAM TITLE: **HEALTH**

PROGRAM EXPENDITURES	IN DOLLARS				IN THOUSANDS			
	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19	FY2019-20	FY2020-21
REVENUE BONDS		31,500,000						
FEDERAL FUNDS		3,500,000						
TOTAL POSITIONS	5,156.37*	5,151.37*	5,150.37*	5,150.37*	5,150.50*	5,150.50*	5,150.50*	5,150.50*
TOTAL PROGRAM COST	1,350,626,482	1,341,787,574	1,304,646,570	1,316,777,256	1,304,717	1,304,717	1,304,717	1,304,717

OPERATING AND CAPITAL APPROPRIATIONS

REPORT P61-A

PROGRAM ID: **HTH100**
 PROGRAM STRUCTURE NO. **05010101**
 PROGRAM TITLE: **COMMUNICABLE DISEASE & PUBLIC HEALTH NUR**

PROGRAM EXPENDITURES	IN DOLLARS				IN THOUSANDS			
	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19	FY2019-20	FY2020-21
OPERATING COST	265.87*	266.87*	266.87*	266.87*	266.9*	266.9*	266.9*	266.9*
PERSONAL SERVICES	20,100,876	20,353,650	22,284,918	22,504,695	22,505	22,505	22,505	22,505
OTHER CURRENT EXPENSES	12,751,856	13,028,587	12,970,349	12,970,349	12,970	12,970	12,970	12,970
TOTAL OPERATING COST	32,852,732	33,382,237	35,255,267	35,475,044	35,475	35,475	35,475	35,475
BY MEANS OF FINANCING								
GENERAL FUND	249.87* 24,288,286	249.87* 24,398,426	249.87* 25,851,065	249.87* 25,993,987	249.9* 25,994	249.9* 25,994	249.9* 25,994	249.9* 25,994
SPECIAL FUND	* 90,720	1.00* 435,589	1.00* 422,589	1.00* 422,589	1.0* 423	1.0* 423	1.0* 423	1.0* 423
FEDERAL FUNDS	* 3,507,482	* 3,407,505	* 3,830,015	* 3,906,870	* 3,907	* 3,907	* 3,907	* 3,907
OTHER FEDERAL FUNDS	16.00* 4,834,498	16.00* 5,008,971	16.00* 5,008,971	16.00* 5,008,971	16.0* 5,009	16.0* 5,009	16.0* 5,009	16.0* 5,009
INTERDEPT. TRANSFER	* 131,746	* 131,746	* 142,627	* 142,627	* 142	* 142	* 142	* 142
CAPITAL INVESTMENT APPROPRIATIONS								
DESIGN		1,000						
CONSTRUCTION		520,000						
TOTAL CAPITAL APPROPRIATIONS		521,000						
BY MEANS OF FINANCING								
G.O. BONDS		521,000						
TOTAL POSITIONS	265.87*	266.87*	266.87*	266.87*	266.90*	266.90*	266.90*	266.90*
TOTAL PROGRAM COST	32,852,732	33,903,237	35,255,267	35,475,044	35,475	35,475	35,475	35,475

PROGRAM ID: HTH100
 PROGRAM STRUCTURE: 05010101
 PROGRAM TITLE: COMMUNICABLE DISEASE AND PUBLIC HEALTH NURSING SERVICES

	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21
MEASURES OF EFFECTIVENESS								
1. NEW ACTIVE TB CASE RATE PER 100,000 RESIDENTS	9	8.5	8.5	8.5	8.5	8.5	8.5	8.5
2. ACTIVE TB CASES - PROPORTRN COMPL RECOM THERAPY (%)	96	96	96	96	96	96	96	96
3. NON-ACTIVE TB CASES - PROPRTN COMPL RECOM THERAPY	59	55	57	59	61	63	65	67
4. CHLAMYDIA CASE RATE IN WOMEN 18-25 Y/O PER 100,000	500	480	480	480	480	480	480	480
5. NEWLY REPORTED HIV CASES PER 100,000	8.5	5.5	5.5	5.5	5.5	5.5	5.5	5.5
6. NEWLY DIAGNOSED HANSEN'S DISEASE CASES PER 100,000	1.4	1.4	1.4	1.4	1.4	1.4	1.4	1.4
7. % OUTPATIENTS W/NEW COMPLICATNS FROM HANSEN'S DIS	1	1	1	1	1	1	1	1
8. ANNL KALAUPAPA REGISTRY PATIENT CARE/RESIDENT DAYS	2650	2300	2200	2100	2000	1800	1700	1700
9. %OF COMPLETED NURSING CONSULTATIONS - DOE STUDENTS			100	100	100	100	100	100
10. % OF PHN-ENROLLED ELDER >60Y W/O FALL RELATED HPT			95	95	95	95	95	95
PROGRAM TARGET GROUPS								
1. RESIDENT POPULATION, STATE OF HAWAII (IN THOUS)	1363	1363	1366	1369	1372	1375	1378	1381
2. CONTACTS OF INFECTIOUS TB CASES	750	750	750	750	750	750	750	750
3. CLASS B IMMIGRANTS	800	800	800	800	800	800	800	800
4. WOMEN 18-25 YEARS OF AGE	70000	70000	70000	70000	70000	70000	70000	70000
5. CONTACTS OF HIV CASES FRM DOH'S HIV COUNSLNG/TSTNG	40	20	40	40	40	40	40	40
6. PATIENTS ON THE KALAUPAPA REGISTRY	14	16	16	15	15	15	15	15
7. CONTACTS OF HANSEN'S DISEASE CASES	1040	1040	1040	1040	1040	1040	1040	1040
8. OUTPATIENTS W/ HANSEN'S DISEASE-RELATED DISABILI	100	115	110	110	110	110	110	110
9. CHILDREN IN DOE SCHOOLS			185270	185270	185270	185270	185270	185270
10. POPULATION >60 YEARS OLD			277300	277300	277300	277300	277300	277300
PROGRAM ACTIVITIES								
1. NO. OF INDIVIDUALS RECVNG COUNSELNG/EVAL/SCREENING	93810	200000	200000	200000	200000	200000	200000	200000
2. NO. INDIV RECVNG EVAL FOR SUSPCTD EXP TO COMM DIS	3670	3670	3670	3670	3670	3670	3670	3670
3. NO. OF INDIV RECVNG TREATMNT FOR COMM DISEASE	2775	4000	4000	400	4000	4000	4000	4000
4. NO. OUTPATNT VISTS/EVAL BY PHYS/NURSES/SW/PARAMED	20500	20500	20500	20500	20500	20500	20500	20500
5. NO. OF LABORATORY TESTS OBTAINED AND REVIEWED	60000	60000	60000	60000	60000	60000	60000	60000
6. NO. OF WOMEN, 18-25, SCREENED FOR CHLAMYDIA	5000	5000	5000	5000	5000	5000	5000	5000
7. NO. PATIENTS PROVIDD HIV-RELATD DRUG TREATMNT ASST	410	410	410	410	410	410	410	410
8. NO. OF STERILE SYRINGES EXCHANGED	600000	900000	800000	800000	800000	800000	800000	800000
9. #OF PHN CONTACTS TO COMPLETE CONSULTATIONS -DOE ST			9500	9500	9500	9500	9500	9500
10. # OF PHN CONTACTS FOR PHN-ENROLLED ELDERS > 60 Y/O			500	500	500	500	500	500
PROGRAM REVENUES BY TYPE (IN THOUSANDS of DOLLARS)								
REVENUE FROM OTHER AGENCIES: FEDERAL	8,260	8,260	8,260	8,260	8,260	8,260	8,260	8,260
CHARGES FOR CURRENT SERVICES	27	28	23	23	23	23	23	23
NON-REVENUE RECEIPTS	114	115	115	115	115	115	115	115
TOTAL PROGRAM REVENUES	8,401	8,403	8,398	8,398	8,398	8,398	8,398	8,398
PROGRAM REVENUES BY FUND (IN THOUSANDS of DOLLARS)								
GENERAL FUNDS	136	138	138	138	138	138	138	138
SPECIAL FUNDS	8,265	8,265	8,260	8,260	8,260	8,260	8,260	8,260
TOTAL PROGRAM REVENUES	8,401	8,403	8,398	8,398	8,398	8,398	8,398	8,398

NOTE: PROGRAM REVENUES BY TYPE AND FUND MAY NOT BE ACCURATE DUE TO SYSTEM ERROR.

A. Statement of Program Objectives

To reduce the incidence, severity, and disabling effects of established, communicable diseases of public health importance (i.e. tuberculosis (TB), sexually transmitted disease (STDs), Human Immunodeficiency Virus (HIV) and Hansen's disease (HD)) by adopting preventive measures and by undertaking programs of early detection and effective treatment. To provide long-term care to Hansen's disease patients who have been disabled either directly from pathological effects of the disease, or psychologically or socially from the effects of prolonged institutionalization. To improve and maintain the health of individuals and communities by promoting healthy lifestyle choices and assuring access to health care services through public health nursing and school health-related services.

B. Description of Request and Compliance with Section 37-68(1) (A) (B)

Adjust federal fund ceiling per Form FF (0.00/\$164,762 in federal funds (N); 0.00/\$164,762 N).

C. Description of Activities Performed

TB Control Branch – Coordinates and provides screening for active TB disease and TB infection using skin test, blood tests and X-rays. The clinic provides direct patient care for complex TB cases and oversees the treatment of cases in neighboring islands and the medical community.

Hansen's Disease Branch – The Hansen's Disease Community Program prevents the spread of Hansen's disease through case management, treatment and epidemiological follow up of new cases. The program provides a secure living environment and all medical care for the patients of Kalaupapa. Hale Mohalu Hospital on Oahu permits a higher level of medical care for the Kalaupapa patients.

STD/AIDS Prevention Branch (SAPB) - Provides surveillance, prevention, and treatment in conjunction with community partners to reduce the spread of STDs and HIV infection statewide. The STD Clinic, located at Diamond Head Health Center, offers free examination and treatment services. The statewide Gonorrhea/Chlamydia Screening reduces the reservoir of infection in asymptotically affected women and their partners. The SAPB also coordinates and provides HIV testing, partner services, linkage and retention to medical services throughout the State.

Public Health Nursing Branch (PHNB) – Supports departmental policies, program priorities and community health needs through population-based approaches and capacity building activities focusing on health equity and culturally competent services to at-risk and vulnerable populations. They promote healthy lifestyles and improve health practices employing comprehensive, family-centered, public health nursing services for individuals, families, groups, and communities. PHNB also responds to communicable disease, epidemic, and other public health disease outbreaks. In addition, they respond to catastrophic community emergencies, natural disasters and biological exposures or outbreaks.

D. Statement of Key Policies Pursued

The TB Control Branch operates to limit and control tuberculosis in accordance with Hawaii Revised Statutes (HRS) Chapter 325 and Hawaii Administrative Rules (HAR) Title 11, Chapter 164.

E. Identification of Important Program Relationships

Communicable Disease and Public Health Nursing Division (CDPHND) programs work with hospitals, clinics, health care providers, nurses and many other health-related personnel; the US Immigration and Naturalization program; AIDS service organizations; all four military services and the U.S.

Coast Guard; and pharmacies and diagnostic laboratories throughout the State. CDD services support and receive support from many State government agencies such as the Departments of Education, Human Services, Public Safety, Accounting and General Services, Executive Office on Aging, and the University of Hawaii, including the University of Hawaii Schools of Nursing & Dental Hygiene and Medicine, and the John A. Burns School of Medicine. Other program relationships include the federal Office of the Inspector General and private community health centers in Hawaii. Similar interaction occurs within the Department of Health, most commonly with District Health Offices; Maternal and Child Health Branches; Alcohol and Drug Abuse, Adult Mental Health, Disease Outbreak Control, and State Laboratories Divisions.

The federal government provides significant resources to all programs and, in return, requires strict adherence with program guidelines. Funding and other support comes from the Public Health Service, Centers for Disease Control and Prevention, Ryan White Care Act, and other U.S. Department of Health and Human Services programs. Since 1953, Hawaii has received annual reimbursement from the federal government for the care and treatment of Hansen's disease patients in State facilities. The DOH and the National Park Service (NPS) entered into a cooperative agreement in 1984 that gradually transfers non-medical operations to the NPS with the DOH continuing to be responsible for health care services. Infrastructure transfer within Kalaupapa is contingent on NPS funding levels.

F. Description of Major External Trends Affecting the Program

Hawaii continues to report the highest annual case rates in the US for tuberculosis and Hansen's disease. Hawaii's TB and HD case rates are primarily affected by immigration. The Immigration Act of 1990 and the Compact of Free Association (COFA) have resulted in a steady influx of immigrants and migrants from nations in Asia and the Pacific Basin where TB and HD is endemic. Rates of chlamydia in Hawaii remain high. The large number of

patients who meet criteria for testing and the increased costs of accurate chlamydia tests provide challenges for STD control. Antimicrobial-resistant gonorrhea strains necessitate increased surveillance and other public health measures to control disease transmission. An increasing number of medically fragile school children under the federal, Individuals with Disabilities and Education Act (IDEA) and children requiring disability accommodations under the 504 Plan substantially increased the number of assessments requested of PHNB. Limited resources and challenges recruiting nurses require PHNB to focus on populations at greatest risk for their support. Kalaupapa National Historic Park is co-managed by the HD Branch and the National Park Service (NPS). Severe budget constraints experienced at the federal level are negatively impacting the NPS's staffing and operations in Kalaupapa. Previously transitioned infrastructure responsibilities to the NPS are more frequently not being performed.

G. Discussion of Cost, Effectiveness, and Program Size Data

Staff reduction to the Kalaupapa Settlement over the past 12 years has reached the minimum level to operate safely in this geographically isolated settlement. Many services are run 24 hours a day, 7 days a week and cannot be reduced without jeopardizing safety, efficiency, and effectiveness.

H. Discussion of Program Revenue

The federal government currently reimburses the State of Hawaii approximately \$1.9 million annually for inpatient care. A portion is used to fund the HD community program needs while the remainder is deposited into the State Treasury.

I. Summary of Analysis Performed: No formal analysis has been performed.

J. Further Consideration

Operating Kalaupapa is an especially difficult problem. Due to its geographic isolation, the facility has to be self-sufficient to provide the services required for its community. Although administering Kalaupapa is costly, Section 326-40, HRS states that it is the policy of the State that the patient residents of Kalaupapa shall be accorded adequate health care and other services for the remainder of their lives. Budget issues and scaled back operations with the NPS in Kalaupapa will require prioritizing health and safety functions within the settlement to insure basic needs are provided.

OPERATING AND CAPITAL APPROPRIATIONS

REPORT P61-A

PROGRAM ID: HTH131
 PROGRAM STRUCTURE NO. 05010102
 PROGRAM TITLE: DISEASE OUTBREAK CONTROL

PROGRAM EXPENDITURES	IN DOLLARS				IN THOUSANDS			
	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19	FY2019-20	FY2020-21
OPERATING COST	52.00*	52.00*	52.00*	52.00*	52.0*	52.0*	52.0*	52.0*
PERSONAL SERVICES	6,628,018	6,845,443	7,829,918	8,016,426	8,016	8,016	8,016	8,016
OTHER CURRENT EXPENSES	6,038,077	6,038,077	6,005,545	5,965,117	5,965	5,965	5,965	5,965
EQUIPMENT	828,318	828,318	828,318	828,318	829	829	829	829
TOTAL OPERATING COST	13,494,413	13,711,838	14,663,781	14,809,861	14,810	14,810	14,810	14,810
BY MEANS OF FINANCING								
GENERAL FUND	20.60*	20.60*	20.60*	20.60*	20.6*	20.6*	20.6*	20.6*
	1,613,768	1,613,768	1,733,714	1,775,150	1,775	1,775	1,775	1,775
FEDERAL FUNDS	31.40*	31.40*	31.40*	31.40*	31.4*	31.4*	31.4*	31.4*
	10,736,954	10,736,954	11,110,428	11,215,072	11,215	11,215	11,215	11,215
OTHER FEDERAL FUNDS	*	*	*	*	*	*	*	*
	1,143,691	1,361,116	1,819,639	1,819,639	1,820	1,820	1,820	1,820
TOTAL POSITIONS	52.00*	52.00*	52.00*	52.00*	52.00*	52.00*	52.00*	52.00*
TOTAL PROGRAM COST	13,494,413	13,711,838	14,663,781	14,809,861	14,810	14,810	14,810	14,810

PROGRAM ID: HTH131
 PROGRAM STRUCTURE: 05010102
 PROGRAM TITLE: DISEASE OUTBREAK CONTROL

	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21
MEASURES OF EFFECTIVENESS								
1. % ENTEROHEMORRHAGIC E. COLI, HEPATITIS A, REPORTED	100	100	100	100	100	100	100	100
2. PERCENT REPORTED FOODBORNE DISEASE OUTBREAK	100	100	100	100	100	100	100	100
3. % CHILDREN AGE 5 YEARS MEETING IMMUNIZATION REQ	98	99	99	99	99	99	99	99
4. % ADOLESCENTS MEETING IMMUNIZATION REQUIREMENTS	0	0	0	0	0	0	0	0
5. % OF INFANTS BORN TO HEPATITIS B CARRIERS SERIES	100	100	100	100	100	100	100	100
6. % KEY COMMUNITY STAKEHOLDERS ENGAGED IN ACTIVITIES	65	65	75	85	85	85	85	85
PROGRAM TARGET GROUPS								
1. TOTAL # HAWAII RESIDENTS (1000'S)	1300	1300	1300	1300	1300	1300	1300	1300
2. TOTAL # VISITORS TO HAWAII (1000'S)	6768	6768	6768	6768	6768	6768	6768	6768
3. TOTAL # CHILDREN AGE FIVE YEARS (1000'S)	18	18	18	18	18	18	18	18
4. TOTAL # OF ADOLESCENTS (1000'S)	84	84	84	84	84	84	84	84
5. NUMBER OF BIRTHS EXCLUDING MILITARY (100'S)	158	158	158	158	158	158	158	158
6. TOT# CHDRN BORN TO HEP B SURF ANTGN+ WOMEN (100'S)	2	2	2	2	2	2	2	2
7. TOTAL # KEY CMMTY STAKEHOLDERS FOR EMGRY RESPONSE	232	232	232	232	232	232	232	232
PROGRAM ACTIVITIES								
1. # HI RESIDENTS ENTERED, MAINTAINED IN IMM REGISTRY	767690	767690	867690	967690	967690	967690	967690	967690
2. # SCH CHLD SURVEYED FOR IMM COVERAGE (1000'S)	220	220	220	220	220	220	220	220
3. # OF PERINATAL HEPATITIS B INFECTED INFANTS	0	0	0	0	0	0	0	0
4. # INFECTIOUS DISEASE CASES INVESTIGATED	4800	4800	4800	4755	4755	4755	4755	4755
5. # INFECTIOUS DISEASE OUTBREAKS IDENTIFIED	14	14	14	14	14	14	14	14
6. # KEY CMMTY STAKEHOLDERS ENGAGED IN ACTIVITIES	37	37	37	37	37	37	37	37
PROGRAM REVENUES BY TYPE (IN THOUSANDS of DOLLARS)								
REVENUE FROM OTHER AGENCIES: FEDERAL	9,934	10,541	10,285	10,284	10,284	9,730	9,730	9,730
NON-REVENUE RECEIPTS	12	14						
TOTAL PROGRAM REVENUES	9,946	10,555	10,285	10,284	10,284	9,730	9,730	9,730
PROGRAM REVENUES BY FUND (IN THOUSANDS of DOLLARS)								
SPECIAL FUNDS	9,934	10,541	10,285	10,284	10,284	9,730	9,730	9,730
ALL OTHER FUNDS	12	14						
TOTAL PROGRAM REVENUES	9,946	10,555	10,285	10,284	10,284	9,730	9,730	9,730

NOTE: PROGRAM REVENUES BY TYPE AND FUND MAY NOT BE ACCURATE DUE TO SYSTEM ERROR.

A. Statement of Program Objectives

To reduce the incidence, severity, and disabling effects related to infectious diseases, emerging disease threats and potential natural or intentional hazards including acts of terrorism through assurance of public health preparedness, disease surveillance/early detection, public health investigation, public health interventions such as distribution of medical countermeasures as indicated, appropriate public health recommendations, education, and other methods of disease prevention and risk reduction.

B. Description of Request and Compliance with Section 37-68 (1)(A)(B)

1. Establish 1.0 temporary full-time equivalent (FTE) Accountant III - for the federally-funded Hawaii Immunizations and Vaccines for Children Program grant and the Public Health Preparedness grant (0.00/\$66,594 in other federal funds (P); 0.00/\$66,594P).
2. Establish 1.0 temporary FTE Public Health Educator - for the federally-funded Public Health Preparedness grant.(0.00/\$40,428 in federal funds (N); 0.00/\$0N).
3. Establish 4.00 temporary FTE positions - for the federally-funded Epidemiology & Laboratory Capacity building grant.(0.00/\$391,929P; 0.00/\$391,929P).

C. Description of Activities Performed

The Disease Outbreak Control Division (DOCD) is responsible for preventing and controlling infectious diseases, except leprosy, tuberculosis, and sexually transmitted diseases, for which separate programs exist. DOCD coordinates public health preparedness activities as well as uniformly applies policies, procedures, and practices related to the control and

prevention of infectious, especially emerging, diseases and preparedness and response for public health emergencies throughout the State. Chief activities include:

1. Maintain surveillance of infectious diseases of public health concern.
2. Investigate disease outbreaks and single concerning or unusual cases.
3. Recommend improved disease prevention and control methods.
4. Provide guidance to healthcare providers regarding laboratory diagnosis and clinical management of uncommon diseases.
5. Promote vaccination to improve immunization (disease protection) rates.
6. Support vaccination access for persons lacking financial resources.
7. Assess and assure the State's public health and healthcare preparedness to respond to public health emergencies.

D. Statement of Key Policies Pursued

1. Track infectious disease incidence, prevalence, trends, and public health impact; implement surveillance and control activities.
2. Investigate disease outbreaks and implement measures to prevent transmission and future outbreaks as well as reduce endemic levels.
3. Increase community participation, education, and partnerships to promote vaccine use for protection against infectious diseases.
4. Plan, train, develop, and contribute to policies; establish practices; and implement procedures to respond to public health emergencies.

E. Identification of Important Program Relationships

Infectious disease surveillance, investigation, control, and prevention as well as public health preparedness requires an extensive network of private, public, and other organizations. DOCD coordinates this network to assure an effective, efficient, and timely response to public health threats.

F. Description of Major External Trends Affecting the Program

Infectious disease prevention and control is a core Department function through DOCD's activities. Recently, diseases with substantial global impact, e.g. the H1N1 pandemic and SARS, have emerged or reemerged, e.g. West Nile Virus; preparation is critical to an effective response—demonstrated by having Stop Flu at School well established to efficiently administer pandemic vaccine to the widest distribution of school-aged children. Diseases unusual on the mainland, e.g. leptospirosis and angiostrongyliasis, are also a concern as are more common infections (e.g. pertussis/whooping cough or *Salmonella*). Hawaii's growing population and our many visitors increase the likely introduction and spread of infectious diseases, some with potentially catastrophic consequences across multiple sectors. A strong Disease Outbreak Control program is essential to successfully address infectious threats.

DOCD maintains and enhances epidemiologic capacity through statewide surveillance and response capabilities for disease investigations and has developed and implemented innovative electronic surveillance systems to assure timely alerts and prompt investigation measures. DOCD also actively promotes vaccination, a proven cost effective measure to prevent infectious disease spread. Federally funded vaccines, a diminishing resource, are available for approximately 2/3 of Hawaii's keiki. With statute now firmly established, Hawaii joins other states in utilizing an immunization registry as a repository for vaccination records, which will facilitate assessing vaccination rates and investigating diseases such as measles.

Intentional and accidental man-made and natural hazard threats highlight the need to assure planning and preparedness toward enhancing surveillance resources and response, e.g. to potentially weaponized infectious diseases. DOCD conducts needs assessments; mobilizes and trains Department employees and volunteers to engage in an emergency

response; implements preparedness campaigns to increase community awareness; plans, conducts, and evaluates response exercises; and evaluates and updates statewide public health emergency response plans. DOCD also coordinates closely with the Healthcare Association of Hawaii to ensure the preparedness of the healthcare system.

G. Discussion of Cost, Effectiveness, and Program Size Data

The HTH 131 program budget request for FB 15-17 reflects current services. Besides planning outreach services, the Immunization Branch coordinates the annual Stop Flu at School program, through which children ages 5-13 years at all participating public and private schools are offered free flu vaccination each fall. Meanwhile, 24/7/365 surveillance of and response to infectious diseases is a core Department function accomplished by the Disease Investigation Branch.

Previously, federal grant funding had fully supported the State Electronic Laboratory Reporting program, including staff as well as system and software support; this critical system links all major laboratories in the State to DOCD to provide real-time electronic reporting of test results for diseases of public health concern. However, federal funding has diminished resulting in severely decreased fiscal support in this area as well staffing to conduct and coordinate disease surveillance. If alternate funds are not soon identified, Hawaii's residents and visitors will be vulnerable as the State will have minimal if any situational awareness of infectious disease risks. Federal cooperative agreements have also supported activities/resources to prepare the State to respond effectively and efficiently to public health emergencies, including man-made and natural disasters. However, while many gains have been made toward ensuring the State's capacity to respond to public health emergencies (e.g. 2009 pandemic response), these advances are precarious as federal funding decreases in these areas as

well with the federal government increasingly expecting states to bear the burden for the sustainment of their own preparedness and response capacity.

H. Discussion of Program Revenue

None.

I. Summary of Analysis Performed

None.

J. Further Considerations

None.

OPERATING AND CAPITAL APPROPRIATIONS

REPORT P61-A

PROGRAM ID: HTH730
 PROGRAM STRUCTURE NO. 050103
 PROGRAM TITLE: EMERGENCY MEDICAL SVCS & INJURY PREV SYS

PROGRAM EXPENDITURES	IN DOLLARS				IN THOUSANDS			
	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19	FY2019-20	FY2020-21
OPERATING COST	16.00*	13.00*	13.00*	13.00*	13.0*	13.0*	13.0*	13.0*
PERSONAL SERVICES	1,354,132	1,559,720	1,669,325	2,049,176	2,050	2,050	2,050	2,050
OTHER CURRENT EXPENSES	76,775,304	80,763,580	80,769,616	81,021,483	81,021	81,021	81,021	81,021
EQUIPMENT	217,368	217,368	217,368	217,368	217	217	217	217
TOTAL OPERATING COST	78,346,804	82,540,668	82,656,309	83,288,027	83,288	83,288	83,288	83,288
BY MEANS OF FINANCING								
GENERAL FUND	13.00*	13.00*	13.00*	13.00*	13.0*	13.0*	13.0*	13.0*
	57,191,251	55,891,251	55,977,661	56,004,011	56,004	56,004	56,004	56,004
SPECIAL FUND	*	*	*	*	*	*	*	*
	20,072,874	26,416,707	26,438,648	26,444,016	26,444	26,444	26,444	26,444
FEDERAL FUNDS	10,563							
	3.00*	*	*	*	*	*	*	*
OTHER FEDERAL FUNDS	1,072,116	232,710	240,000	840,000	840	840	840	840
TOTAL POSITIONS	16.00*	13.00*	13.00*	13.00*	13.00*	13.00*	13.00*	13.00*
TOTAL PROGRAM COST	78,346,804	82,540,668	82,656,309	83,288,027	83,288	83,288	83,288	83,288

PROGRAM ID: HTH730
 PROGRAM STRUCTURE: 050103
 PROGRAM TITLE: EMERGENCY MEDICAL SERVICES AND INJURY PREVENTION SYSTEM

	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21
MEASURES OF EFFECTIVENESS								
1. % RESPONSES MEETING RESPONSE TIME STD - OAHU	92.2	90	90	90	90	90	90	90
2. % RESPONSES MEETING RESPONSE TIME STD - KAUAI	92.3	90	90	90	90	90	90	90
3. % RESPONSES MEETING RESPONSE TIME STD - HAWAII	94.1	90	90	90	90	90	90	90
4. % RESPONSES MEETING RESPONSE TIME STD - MAUI	95.4	90	90	90	90	90	90	90
5. % INCR IN COMM COAL/PARTN INITIATD & SPPT INJ PREV	9	0	5.7	0	2.7	0	0	0
6. % INCR IN NO. OF PERSONS TRAINED IN INJ PREVENTION	-30	0	0	0	0	0	2	0
7. PERCENT OF AGE-APPROPRIATE SEAT USE STATEWIDE	82	92	92	94	94	94	94	94
PROGRAM TARGET GROUPS								
1. GENERAL DE FACTO POPULATION (THOUSANDS)	1538	1539	1554	1554	1554	1554	1554	1554
2. NUMBER OF HIGH RISK CARDIAC CASES	4339	4339	4339	4339	4339	4339	4339	4339
3. NUMBER OF HIGH RISK TRAUMA CASES	6265	6175	6078	5987	5897	5809	5722	5636
4. NUMBER OF HIGH RISK PEDIATRIC CASES	1827	1827	1827	1827	1827	1827	1827	1827
5. NUMBER OF CARDIOPULMONARY ARREST CASES	1226	1226	1226	1226	1226	1226	1226	1226
6. NO. OF LICENSED GROUND AMBULANCE SERVICE PROVIDERS	8	8	8	8	8	8	8	8
7. NO. OF LICENSED AIR AMBULANCE SERVICE PROVIDERS	6	6	6	6	6	6	8	8
8. NO. OF YOUTHS UNDER 24 AND SENIORS 65 YRS & OLDER	641791	641014	668045	668045	668045	668045	668045	668045
PROGRAM ACTIVITIES								
1. ADM & ENFORCNG STATE EMS RULES & REGS (STAFF-DAYS)	260	260	260	260	260	260	260	260
2. ADM/MAINT EMS COMM SYSTEM (% TIME SYSTM OPERATNL)	100	100	100	100	100	100	100	100
3. ADM/MAINT EMS/INJ PREV DATA COLL/EVAL (STAFF-DAYS)	303	520	520	520	520	520	520	520
4. NUMBER OF RESPONSES TO EMERGENCY AMBULANCE CALLS	131505	136765	142236	147925	153842	159996	166396	173052
5. NO. OF PATIENTS BILLED FOR EMERGENCY AMBULANCE SVC	77977	77977	84340	87714	91222	94871	98666	102613
6. PERCENTAGE OF AMBULANCE SERVICE REVENUES COLLECTED	66.96	66.96	67	67	67	67	67	67
7. ADM/MAINT EMS QUAL ASSUR & QUAL IMPRV PRG (ST-DYS)	367	352	312	312	312	312	312	312
8. ADM/MAINT STATE HTH EMG PREP PLAN/EXR PARTC (ST-D)	1	1	1	1	1	1	1	1
9. NO. TRAINED IN SUICIDE/FALLS/DRWNG PREV & SAFR ENV	1115	1100	1100	1200	1200	1200	1200	1200
10. # COMM COAL/TSKFRC/PRTRNSHP INIT/SUPPT IN INJ PREV	35	35	37	37	38	38	38	38
PROGRAM REVENUES BY TYPE (IN THOUSANDS of DOLLARS)								
TAXES	24,716	25,174	25,174	25,174	25,174	25,174	25,174	25,174
REVENUES FROM THE USE OF MONEY AND PROPERTY	88							
REVENUE FROM OTHER AGENCIES: FEDERAL	302	232	232					
CHARGES FOR CURRENT SERVICES	35,232	35,232	35,232	35,232	35,232	35,232	35,232	35,232
FINES, FORFEITS AND PENALTIES	85							
NON-REVENUE RECEIPTS	672	672	672	672	672	672	672	672
TOTAL PROGRAM REVENUES	61,095	61,310	61,310	61,078	61,078	61,078	61,078	61,078
PROGRAM REVENUES BY FUND (IN THOUSANDS of DOLLARS)								
GENERAL FUNDS	35,232	35,232	35,232	35,232	35,232	35,232	35,232	35,232
SPECIAL FUNDS	25,191	25,406	25,406	25,174	25,174	25,174	25,174	25,174
ALL OTHER FUNDS	672	672	672	672	672	672	672	672
TOTAL PROGRAM REVENUES	61,095	61,310	61,310	61,078	61,078	61,078	61,078	61,078

NOTE: PROGRAM REVENUES BY TYPE AND FUND MAY NOT BE ACCURATE DUE TO SYSTEM ERROR.

A. Statement of Program Objectives

To minimize death, injury, and disability due to life threatening situations by assuring the availability of high quality emergency medical care through the development of a statewide system capable of providing coordinated emergency medical care and injury prevention services.

B. Description of Request and Compliance with Section 37-68(1)(A)(B)

1. Add funds to align with federal awards (PHHS Block Grant) for the Injury Prevention & Control program, HTH 730/MT (0.00/\$7,290 in other federal funds (P); 0.00/\$7,290P).
2. Add funds to align with federal award (Core VIPP), HTH 730/MT (0.00/\$0P; 0.00/\$600,000P).

C. Description of Activities Performed

Program activities include ambulance services, establishment of pre-hospital care standards and protocols, maintenance of a medical communication system, licensure of all ambulances, data collection and analysis, billing and collection of fees for emergency ambulance services, and other support services to maintain quality pre-hospital medical care throughout communities statewide, and support for continuing development and operation of a comprehensive state trauma system. Also provides a comprehensive array of injury prevention and control programs that include, but are not limited to motor vehicle safety, falls and suicide prevention, using a spectrum of strategies and working through established partnerships and coalitions in communities statewide.

D. Statement of Key Policies Pursued

The Emergency Medical Services and Injury Prevention System Branch (EMSIPSB) services primarily address departmental policies and program priorities to maintain and protect health and safety and serve the emergency health needs of the people of the State.

E. Identification of Important Program Relationships

The EMSIPSB coordinates with and draws resources as appropriate from Federal, State, County and private public safety agencies, health care providers, educators, businesses and consumers.

F. Description of Major External Trends Affecting the Program

Injury (trauma) is the leading cause of early disability and productive years of life lost costing Hawaii many lives and millions of dollars each year. EMSIPSB is planning and implementing a comprehensive statewide trauma system for Hawaii assisted by funding from the Trauma Special Fund created in ACT 305, SLH 2006. The development of a comprehensive trauma system is anticipated to result in improved outcomes and fewer complications for trauma victims. There are considerable challenges to delivering high quality trauma care in many parts of the state as hospitals have financial difficulties and many communities have shortages of physicians and other personnel to provide needed trauma services.

Injuries due to falls among older adults are a major public health issue. Among older adults, falls in Hawaii are by far the leading cause of injury-related deaths and hospitalizations, and by far the leading cause of EMS attended injuries. Annually, falls result in 110 deaths and nearly 1,960 hospitalizations among Hawaii seniors. Direct medical charges for fall and fall-related injuries among older adults amount to nearly \$130 million, an

amount that could be doubled if the costs of rehabilitation and long term care were included.

G. Discussion of Cost, Effectiveness, and Program Size Data

Ambulance response time measures are always variable due to the number of responses within each geographic area, especially rural areas. Units that are heavily utilized may not meet target response times when calls come in close together. The response times for FY 14 exceeded program targets for each county. For Oahu and Maui, this is in part the result of the addition of a new ambulance for Central Oahu and the addition of a rapid response unit for the Maalaea area on Maui. The decrease in the percentage of ambulance service revenues collected in FY 14 and estimated for FYs 15-21 is due, in part, to changes in Medicare reimbursement rates coupled with the State increasing fees for emergency services; but primarily is due to a change in the billing collector's methodology and timing for including mandated adjustments in their calculations and their understanding and adherence to regulations of the Centers for Medicare and Medicaid Services (CMS).

H. Discussion of Program Revenues

§321-232, Hawaii Revised Statutes (HRS), authorizes the department of health to establish reasonable fees for services rendered to the public; provided that such revenues collected are deposited into the state general fund. In FY 2014, the department deposited \$35,231,536 into the state general fund.

§321-234, HRS, authorizes the emergency medical services special fund. The revenue is generated from a \$5 user fee from motor vehicle registration (§249-31). In FY 2014, the department deposited \$5,388,713 into the EMS Special Fund. In addition, ACT 316, SLH 2006, as amended by ACT 192, SLH 2010 provides that moneys collected under the tax imposed pursuant to

§245-3 (a), HRS shall be deposited to the credit of the EMS Special Fund. From July 1, 2009 through June 30, 2013, \$.0050 was deposited for each cigarette sold; From July 1, 2013 and thereafter, \$.0125 will be deposited for each cigarette sold. In FY 2014, the department deposited \$8,787,483.78 into the EMS Special Fund.

ACT 305, SLH 2006 established the trauma system special fund. ACT 316, SLH 2006, as amended by ACT 192, SLH 2010 provides that moneys collected under the tax imposed pursuant to §245-3 (a), HRS shall be deposited to the credit of the trauma system special fund. From July 1, 2009 through June 30, 2013, \$.0075 was deposited for each cigarette sold; From July 1, 2013 and thereafter, \$.0150 will be deposited for each cigarette sold. In FY 2014, the department deposited \$10,540,112.12 into the trauma system special fund. In addition, ACT 231, SLH 2008 provides that moneys collected under surcharges (range between \$10 and \$500) for traffic violations imposed pursuant to Section §291-, HRS be deposited to the trauma system special fund. In FY 2014, the department deposited \$84,528.99 into the trauma system special fund.

I. Summary of Analysis Performed

None.

J. Further Considerations

None.

OPERATING AND CAPITAL APPROPRIATIONS

REPORT P61-A

PROGRAM ID: HTH560
 PROGRAM STRUCTURE NO. 050104
 PROGRAM TITLE: FAMILY HEALTH SERVICES

PROGRAM EXPENDITURES	IN DOLLARS				IN THOUSANDS			
	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19	FY2019-20	FY2020-21
OPERATING COST	301.50*	300.50*	299.50*	299.50*	299.5*	299.5*	299.5*	299.5*
PERSONAL SERVICES	19,339,830	19,419,960	22,206,294	23,371,940	23,370	23,370	23,370	23,370
OTHER CURRENT EXPENSES	81,215,691	81,212,519	79,751,062	80,680,184	80,682	80,682	80,682	80,682
EQUIPMENT	16,500	16,500	16,500	16,500	16	16	16	16
TOTAL OPERATING COST	100,572,021	100,648,979	101,973,856	104,068,624	104,068	104,068	104,068	104,068
BY MEANS OF FINANCING								
GENERAL FUND	108.00*	108.00*	108.00*	108.00*	108.0*	108.0*	108.0*	108.0*
	25,296,742	25,217,539	25,911,631	26,128,760	26,129	26,129	26,129	26,129
SPECIAL FUND	14.00*	14.00*	14.00*	14.00*	14.0*	14.0*	14.0*	14.0*
	20,937,704	20,969,607	20,813,785	20,831,186	20,830	20,830	20,830	20,830
FEDERAL FUNDS	173.00*	172.00*	171.00*	171.00*	171.0*	171.0*	171.0*	171.0*
	45,162,123	45,000,228	46,545,016	48,354,032	48,354	48,354	48,354	48,354
OTHER FEDERAL FUNDS	6.50*	6.50*	6.50*	6.50*	6.5*	6.5*	6.5*	6.5*
	8,972,011	9,258,164	8,499,983	8,551,205	8,552	8,552	8,552	8,552
INTERDEPT. TRANSFER	*	*	*	*	*	*	*	*
	203,441	203,441	203,441	203,441	203	203	203	203
TOTAL POSITIONS	301.50*	300.50*	299.50*	299.50*	299.50*	299.50*	299.50*	299.50*
TOTAL PROGRAM COST	100,572,021	100,648,979	101,973,856	104,068,624	104,068	104,068	104,068	104,068

PROGRAM ID: HTH560
 PROGRAM STRUCTURE: 050104
 PROGRAM TITLE: FAMILY HEALTH SERVICES

	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21
MEASURES OF EFFECTIVENESS								
1. PERCENT OF PRETERM BIRTHS	10.2	10.2	10.2	10.2	10.2	10.2	10.2	10.2
2. % UNINSURED IND REC SUBSIDIZED PRIMARY CARE - POS	28	29	28	28	28	28	28	28
3. % CHILDREN (0-21) W/SP HTH CARE NEEDS W/MEDICAL HM	98	95	95	95	95	95	95	95
4. % LB SCREENED METABOLIC DISORDERS AND HEMOGLOB	99	99	99	99	99	99	99	99
5. PERCENT OF WIC ENROLLED WOMEN AND CHILDREN UP TO 5	94	95	95	95	95	95	95	95
6. % OF WIC WOMEN WHO INITIATE BREASTFEEDING	78	85	85	85	85	85	85	85
7. PERCENT OF PRENATAL SMOKING	5	5	5	5	5	5	5	5
8. % INCR DOM./SEXUAL VIOLENCE KNOW. THRU PREV ED SVS	93	90	90	90	90	90	90	90
9. % CHILD 0-3 DEV DELAY BIO AT RISK EI SERV	3.4	3.5	3.5	3.5	3.5	3.5	3.5	3.5
10. % CHILDREN ENROLLED IN HV PROGRAM WHO MED HOME	91	91	92	93	94	95	95	95
PROGRAM TARGET GROUPS								
1. NUMBER OF LIVE BIRTHS	18916	18900	19000	19000	19000	19000	1900	1900
2. NUMBER OF UNINSURED INDIVIDUALS	90755	91000	90000	90000	90000	90000	90000	90000
3. NUMBER OF CHILDREN WITH SPECIAL HEALTH NEEDS	35022	35000	35000	35000	35000	35000	35000	35000
4. NUMBER OF LIVE BIRTHS	18916	18900	19000	19000	19000	19000	19000	19000
5. # WIC ENROLLED WOMEN CHILDREN UP TO 5 YEARS OF AGE	34630	35000	35000	35000	35000	35000	35000	35000
6. # WIC ENROLLED PREGNANT AND POST-PARTUM WOMEN	17817	17800	17800	17800	17800	17800	17800	17800
7. TOTAL NUMBER OF PREGNANT WOMEN	1294	1250	982	982	982	982	982	982
8. FEMALES 15-25 YEARS OF AGE	94723	94723	94723	94723	94723	94723	94723	94723
9. # CHILDREN AGE 0-3 DEV DELAYS OR BIO AT RISK	3596	3500	3500	3500	3500	3500	3500	3500
10. CHILDREN ENROLLED IN A HOME VISITING PROGRAM	629	535	541	541	541	541	541	541
PROGRAM ACTIVITIES								
1. # PREG WOMEN SERVED BY WIC AND PERINATAL SUPPORT	11841	1200	1200	11500	11500	11500	11500	11500
2. # UNINSURED REC DOH SUB PC POS	25388	26000	25000	25000	25000	25000	25000	25000
3. # CSHN 0-21 ASSISTED ACCESS PED SERV (SAFETY NET)	1460	1500	1500	1500	1500	1500	1500	1500
4. # INFANTS SCREENED METABOLIC DISORDERS	474	475	475	475	475	475	475	475
5. # NUTRIT ED CONTACTS/COUNSEL SESS WIC OVERWEIGHT	19174	19174	19174	19174	19174	19174	19174	19174
6. # PRENATAL/POSTPARTUM BRSTFDING INFO TO WIC WOMEN	6284	6750	6750	6750	6750	6750	6750	6750
7. # PREG WMN REC PERINATAL SUPPORT THRU MCHB POS	1294	1300	982	982	982	982	982	982
8. # WOMEN 25- TESTED CHLAMYDIA WITHIN 12 MONTHS	5110	5200	5200	5200	5200	5200	5200	5200
9. # CHILDREN AGE 0-3 DEV DELAYS PROV EARLY INTERVENT	1898	1900	1900	1900	1900	1900	1900	1900
10. # FAMILIES ENROLLED HV + HAVE MED HOME	562	485	490	490	490	490	490	490
PROGRAM REVENUES BY TYPE (IN THOUSANDS of DOLLARS)								
TAXES	8,789	10,500	10,500	10,500	10,500	10,500	10,500	10,500
LICENSES, PERMITS, AND FEES	258	310	330	35	360	360	360	360
REVENUES FROM THE USE OF MONEY AND PROPERTY	3	5	25	25	25	25	25	25
REVENUE FROM OTHER AGENCIES: FEDERAL	40,431	46,052	45,542	45,041	45,266	45,016	45,016	45,016
CHARGES FOR CURRENT SERVICES	2,072	1,973	1,974	1,974	1,974	1,974	1,974	1,974
TOTAL PROGRAM REVENUES	51,553	58,840	58,371	57,575	58,125	57,875	57,875	57,875
PROGRAM REVENUES BY FUND (IN THOUSANDS of DOLLARS)								
SPECIAL FUNDS	49,076	55,922	56,006	55,711	56,036	56,036	56,036	56,036
ALL OTHER FUNDS	2,477	2,918	2,365	1,864	2,089	1,839	1,839	1,839
TOTAL PROGRAM REVENUES	51,553	58,840	58,371	57,575	58,125	57,875	57,875	57,875

NOTE: PROGRAM REVENUES BY TYPE AND FUND MAY NOT BE ACCURATE DUE TO SYSTEM ERROR.

A. Statement of Program Objectives

To improve the well-being of families with a focus on infants, children, and women of child-bearing age by increasing public awareness and professional education, and assuring access to a system of family centered, community-based preventive, early detection, treatment, habilitative and rehabilitative services.

B. Description of Request and Compliance with Section 37-68(1)(A)(B)

Major requests include seventeen (17) proposals to adjust federal funds (N) and other federal funds (P) means of financing to conform to budget appropriation ceiling. (0.00/- \$758,181P; 0.00/- \$706,959P) in FY16, and (-1.00/\$374,817N; -1.00/\$1,797,659N) in FY17.

In addition, there is one (1) "housekeeping" budget proposal for the Family Health Services Administration (HTH 560/KC) to delete \$250,000B in Other Current Expenses for the Early Childhood Obesity Program. The \$250,000 represents a one-time non-recurring budget line item in Act 134, SLH 2013. (0.00/- \$250,000B; 0.00/- \$250,000B)

C. Description of Activities Performed

Family Health Services Division's (FHSD) Maternal and Child Health Branch (MCHB) administers maternal and child health programs for the provision of primary health care, statewide disease prevention and health promotion, promulgating policy, developing standards and providing guidance to assure availability, adequacy, and quality of services. FHSD's Children Special Health Needs Branch (CSHNB) activities include a statewide system of mandated Early Intervention (EI); further development of a family-centered community-based system of comprehensive health services for Children with

Special Health Care Needs (CSHCN); service coordination, social work, nutrition, and access to pediatric specialty services for CSHCN; and genetic services, education, and other activities. FHSD's Women, Infants, and Children (WIC) program provides nutritional foods; nutrition education and counseling; and referrals to health and social services for low income pregnant, breastfeeding, and postpartum women, infants and children up to age five.

D. Statement of Key Policies Pursued

The provision of EI services for children age 0-3 is mandated by federal law (Part C of the Individuals with Disabilities Education Act), state law (HRS §321.352), and Hawaii EI State Plan. CSHNB also facilitates the development of community-based systems of services for CSHCN (Title V), provides specialized health services for CSHCN who have no other resources (HRS §321-52), assures newborn metabolic screening (HRS §321-291) and newborn hearing screening (HRS §321-362), and provides birth defect surveillance (HRS §321-422). Some key public health strategies are promoting breastfeeding as the healthiest and best source of nutrients for infants and promoting good nutrition. FHSD continues to promote policies which reduce domestic violence and sexual assault and promote improved familial relationships. MCHB actively participates in the Child Protection Services Reform.

E. Identification of Important Program Relationships

Multiple Federal agencies assist in the implementation of program activities including the U.S. Centers for Disease Control and Prevention (CDC), U.S. Department of Education, U.S. Department of Health and Human Services/Health Resources and Services Administration, and Agriculture. FHSD also has important relationships with many other organizations, advocates, and state agencies.

F. Description of Major External Trends Affecting the Program

FHSD responds to national and local priorities as defined by data and national mandates. Some key health risk indicators that continue to be of concern are:

- a. The unintended pregnancy rate in Hawaii was 52% in 2012.
- b. The infant mortality rate was 6.1 per 1,000 in 2013.
- c. Women seeking 1st trimester prenatal care was 85.9% in 2013, however there are differences statewide. For example, women seeking 1st trimester prenatal care in Hawaii County was 70% in 2013.
- d. The uninsured rate among the civilian non-institutionalized population was 6.7% in 2013, however 19.3% of patients in Community Health Centers were uninsured in 2013.

Efforts by the Department to address class action suits and newly emergent priorities continue to limit funds designated for prevention activities.

G. Discussion of Cost, Effectiveness, and Program Size Data

WIC tracks early enrollment for pregnant women, breastfeeding initiation and duration, iron-deficiency anemia, low birth weight, and nutrition education. FHSD's WIC program is a potential point of entry to health care for many of its clients and affects increased immunization rates, improved access to pediatric health care, longer pregnancies; fewer premature births; better birth weights; improved childhood growth; and fewer cases of anemia. The cost effectiveness of WIC in promoting healthy birth outcomes and better health is nationally recognized. FHSD's MCHB data sources include: the Pregnancy Risk Assessment and Monitoring System (PRAMS); the Behavioral Risk Factor Surveillance System (BRFSS); the Youth Risk Behavior Survey; and Vital Statistics.

CSHNB tracks Title V and the Office of Special Education Programs national and state performance measures for CSHCN. Cost-effectiveness results from the provision of services which prevent or decrease the need for later high-cost intervention services.

H. Discussion of Program Revenues

Program funds are from: the federal government through the Title V block grant, IDEA Part C, other grants and cooperative agreements; revenues generated from taxes; and reimbursements from third party payers, such as medical insurance and/or Medicaid, whenever available. In addition, some private foundations also provide funds.

The Domestic Violence and Sexual Assault Special Funds are generated from fees collected on marriage and birth certificates as well as designations on individual income tax return forms. Funding sources for CSHNB programs and activities include EI special fund (SF) (Medicaid reimbursement), Newborn Metabolic Screening SF (fees for screening kits), and Birth Defects SF (marriage license fee). The WIC Federal grant is provided year to year and is based partly on the number of WIC participants served. WIC also receives special project funds and performance bonuses varying from year to year. The Breastfeeding Peer Counselor grant is a separate funding stream from the regular WIC grant.

I. Summary of Analysis Performed

None.

J. Further Considerations

None.

OPERATING AND CAPITAL APPROPRIATIONS

REPORT P61-A

PROGRAM ID: HTH590
 PROGRAM STRUCTURE NO. 050105
 PROGRAM TITLE: CHRONIC DISEASE PREVNTION & HEALTH PROMO

PROGRAM EXPENDITURES	--IN DOLLARS--				--IN THOUSANDS--			
	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19	FY2019-20	FY2020-21
OPERATING COST	50.00*	50.00*	50.00*	50.00*	50.0*	50.0*	50.0*	50.0*
PERSONAL SERVICES	5,728,744	5,290,578	6,252,681	8,045,020	8,045	8,045	8,045	8,045
OTHER CURRENT EXPENSES	53,013,651	50,808,231	52,843,351	56,795,360	56,796	56,796	56,796	56,796
EQUIPMENT	4,750	4,750	4,750	4,750	5	5	5	5
TOTAL OPERATING COST	58,747,145	56,103,559	59,100,782	64,845,130	64,846	64,846	64,846	64,846
BY MEANS OF FINANCING								
GENERAL FUND	1,502,565*	200,000*						
	39.00*	39.50*	39.50*	39.50*	39.5*	39.5*	39.5*	39.5*
SPECIAL FUND	50,319,643	50,985,644	51,132,328	51,189,107	51,190	51,190	51,190	51,190
	11.00*	10.50*	10.50*	10.50*	10.5*	10.5*	10.5*	10.5*
OTHER FEDERAL FUNDS	5,335,092	4,307,915	7,358,454	13,046,023	13,046	13,046	13,046	13,046
	*	*	*	*	*	*	*	*
INTERDEPT. TRANSFER	1,589,845	610,000	610,000	610,000	610	610	610	610
TOTAL POSITIONS	50.00*	50.00*	50.00*	50.00*	50.00*	50.00*	50.00*	50.00*
TOTAL PROGRAM COST	58,747,145	56,103,559	59,100,782	64,845,130	64,846	64,846	64,846	64,846

PROGRAM ID: HTH590
 PROGRAM STRUCTURE: 050105
 PROGRAM TITLE: CHRONIC DISEASE PREVENTION AND HEALTH PROMOTION

	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21
MEASURES OF EFFECTIVENESS								
1. % INDIV WHO MEET PHYSICAL ACTIVITY RECOMMENDATIONS	57	57.8	58.6	59.4	60.2	61.1	61.9	62.7
2. % INDIV CONSUME MIN 5 DAILY SERVINGS OF FRUITS/VEG	16.5	16.7	17	17.2	17.5	17.7	17.9	18.2
3. % INDIVIDUALS WHO SMOKE CIGARETTES	12.8	12.6	12.4	12.2	12	11.8	11.6	11.4
4. % ADULTS W/HIGH BLOOD PRESSURE TAKING MEDICATION	78.8	79.9	81.1	82.2	83.3	84.5	85.6	86.7
5. % ADULTS W/DIABETES HAD 2/MORE A1C TESTS PAST YR	70.4	70.6	70.8	71	71.2	71.4	71.6	71.8
6. RATE OF INDIV HOSPITALIZED FOR ASTHMA, PER 100,000	91.88	90.57	89.26	87.95	86.64	85.33	84.02	82.71
7. % ADULTS 50/OVER RECEIVED COLORECTAL CANCER SCRNGS	67.8	68.5	69.3	70.0	70.2	70.5	70.7	71
PROGRAM TARGET GROUPS								
1. TOTAL # OF HAWAII RESIDENTS	1404054	1443000	1482000	1521000	1560000	1599000	1638000	1677000
2. TOTAL # OF CHILDREN ATTENDING HI PUBLIC SCHOOLS	180895	181900	182900	183900	184900	185900	186900	187900
3. TOTAL # OF SNAP-ELIGIBLE INDIVIDUALS IN HAWAII	328524	335100	341800	348600	355600	362700	370000	377400
4. TOTAL # OF ADULT SMOKERS	145873	147600	149300	150900	152300	153600	154800	155900
5. TOTAL # OF ADULTS WITH HYPERTENSION	314778	318600	324500	330400	336000	341600	346900	352200
6. TOTAL # OF ADULTS WITH DIABETES	92130	97000	102100	107500	113000	118700	124600	130800
7. TOTAL # OF INDIVIDUALS WITH ASTHMA	142428	144600	146800	148800	150800	152600	154400	156000
8. TOTAL # OF ADULTS WHO ARE OBESE	239100	242200	245100	247900	250500	252900	255100	257100
PROGRAM ACTIVITIES								
1. % TARGET POPU REACHD THRU SOCIAL-MARKETG CAMPAIGNS	45	45	45	45	45	45	45	45
2. # OF COALITIONS MAINTAINED BY THE PROGRAMS	13	13	13	13	13	13	13	13
3. % OF PUBLIC SCHOOLS MEETING WELLNESS GUIDELINES	78	79	80	81	82	83	84	85
4. # OF INDIVIDUALS REACHED THRU SNAP-ED PROGRAM	22375	20000	20000	20000	20000	20000	20000	20000
5. # OF WEBSITE VISITS TO HHDW & HI HEALTH MATTERS	29622	30500	31400	32300	33300	34300	35300	36400
6. # INDIV REACHED THRU CHRONIC DISEASE SELFMGMT PRGS	2370	2300	2300	2300	2300	2300	2300	2300
7. # TRAININGS FOR STAKEHOLDERS ON CHRONIC DIS ISSUES	101	79	74	74	74	74	74	74
PROGRAM REVENUES BY TYPE (IN THOUSANDS of DOLLARS)								
REVENUES FROM THE USE OF MONEY AND PROPERTY			20	20	20	20	20	20
REVENUE FROM OTHER AGENCIES: FEDERAL	2,884	4,195	3,850	3,850	3,850	3,850	3,850	3,850
REVENUE FROM OTHER AGENCIES: ALL OTHER	52,308	54,109	54,109	54,109	41,146	41,146	41,146	41,146
CHARGES FOR CURRENT SERVICES	42	20	20	20	20	20	20	20
NON-REVENUE RECEIPTS	14,299	13,893	994	994	823	823	823	823
TOTAL PROGRAM REVENUES	69,533	72,217	58,993	58,993	45,859	45,859	45,859	45,859
PROGRAM REVENUES BY FUND (IN THOUSANDS of DOLLARS)								
GENERAL FUNDS	14,299	13,893	994	994	823	823	823	823
SPECIAL FUNDS	53,830	55,780	56,056	56,056	43,093	43,093	43,093	43,093
ALL OTHER FUNDS	1,404	2,544	1,943	1,943	1,943	1,943	1,943	1,943
TOTAL PROGRAM REVENUES	69,533	72,217	58,993	58,993	45,859	45,859	45,859	45,859

NOTE: PROGRAM REVENUES BY TYPE AND FUND MAY NOT BE ACCURATE DUE TO SYSTEM ERROR.

A. Statement of Program Objectives

Promote wellness and improve the quality and lifespan for Hawaii's people through effective prevention, detection, and management of chronic diseases.

B. Description of Request and Compliance with Section 37-68(1)(A)(B)

Adjust other federal fund (P) ceiling appropriation to account for new grants received:

1. Cancer prevention and control beginning in FY 2017 for five years (0.00/\$0 P in FY16; 0.00/\$5,687,569 P in FY17).
2. Healthy Hawaii Initiative, Diabetes, Heart Disease and Stroke Prevention for FY 2016 and FY 2017, 10.00 temporary positions (0.00/\$3,050,539 P; 0.00/\$3,050,539 P).

Tradeoff/Transfer to implement reorganization acknowledged January 21, 2014 (0.00/\$0 in special funds (B); 0.00/\$0 B), (0.00/\$0 P; 0.00/\$0 P).

C. Description of Activities Performed

The Tobacco Settlement Project/Healthy Hawaii Initiative (TSP/HHI) was established per §328L-2, HRS, to administer, distribute, and report on the use of the tobacco settlement special fund (TSSF), and implement the public health program activities described in §328L-4, and -5, HRS, and addresses the risk factors of nutrition, physical activity, and tobacco, and chronic disease areas of asthma, cancer, diabetes, and heart disease and stroke. TSP/HHI supported policy, systems, and environmental change strategies organized by sectors, education, healthcare, worksite, business and industry, and community design and access, to make the healthy choices the default; e.g.

increasing school physical exam requirements, Choose Healthy Now blind vendors project, community walkability audits, and technical assistance (T/A) on state and county electronic smoking device (ESD) policies. Conducted needs assessments and trainings, and supported systems changes with federally qualified healthcare centers, providers, and nonprofit agencies to assess and strengthen the linkage between community services and clinical practice so people diagnosed or at risk for chronic diseases can manage their health. Provided population-based health status monitoring through anonymous adult and school health surveillance systems¹, and conducted program evaluations: Provided health communication messages through mass, digital, and print media outlets, youth theater, and press events. The Bilingual Health Services (BHS) provided Interpreter services for non-English speakers and limited English speaking people per §321-301, HRS.

D. Statement of Key Policies Pursued

The program tracked about 155 measures and actively responded to 60 state and county policies during the 2014 legislative session and into FY2015. Key state policies: requiring 7th grade school physical exam, adding ESDs into smoke free laws §328J, HRS, restricting sales of flavored tobacco products, establishing a pilot comprehensive colorectal cancer screening program, and increasing funding for the Comprehensive Breast Cancer and Cervical Cancer Program (BCCCP). County level policies: supporting electronic benefits transfers (EBTs) in farmer's markets, smoke free beaches, and increasing tobacco sales restriction to age 21. In the Executive Branch, TSP/HHI drafted the worksite wellness policy (Department of Human Resources and Development [DRHD] Policy No. 01.001) and banning ESDs policy in DOH. Provided T/A to other state and county agencies on ESD policies (Comptroller's Memo No. 2014-22).

¹ Surveillance reports available: <http://www.hhdw.org/> and <http://www.hawaiihealthmatters.org/>

E. Identification of Important Program Relationships

TSP/HHI received grants, guidance, and T/A from the Centers for Disease Control and Prevention (CDC) for data collection and reporting, identifying strategies, and program implementation. Worked with DHRD and the Employer Union Trust Fund to pilot worksite wellness, with counties on implementing Complete Streets (§264-20.5, HRS) and Safe Routes to School (§291, HRS) policies including walk audits and bikeshare. Supported Department of Education implementing standards-based health and physical education and Wellness Guidelines, and executed a memorandum of understanding for conducting Hawaii School Health Surveys. Conducted evaluation, data analysis and reporting with the University of Hawaii, Department of Public Health Sciences, and with the School of Medicine editing and publishing the Hawaii Journal of Medicine & Public Health. Healthcare facilities were contracted to provide BCCCP screenings for medically underserved women. Facilitated meetings of community organizations, healthcare providers, educators, researchers, employers, planners, and concerned citizens, various coalitions, task forces, and working groups to assess community needs, and to develop policies and strategies.

F. Description of Major External Trends Affecting the Program

Obesity and chronic disease rates continue to rise among all ethnicities and income levels. Four of the top five causes of deaths are due to chronic disease and 82% of adults have at least one chronic disease or condition.² Tobacco followed by nutrition and physical activity is the leading modifiable risk factor for chronic disease, and obesity is also a concern. Currently, 56% of adults are overweight or obese with prevalence varying from 48% in Kauai

² Heart disease, heart attack, stroke, diabetes, asthma, disability, cancer, chronic obstructive pulmonary disease, high blood pressure, high blood cholesterol or obesity. Chronic Disease Disparities Report, 2011.

to 59% in Hawaii County. Poor nutrition and lack of physical activity (PA) contribute significantly to these rates. In 2010 the cost of treating chronic disease in Hawaii totaled \$3.6 billion and worker absenteeism an additional \$221 million in costs for an annual economic loss of \$3.8 billion. The cost of medical treatment alone is projected to increase by \$6.7 billion by 2020.³

G. Discussion of Cost, Effectiveness, and Program Size Data

The program targets the overall population to change social norms, and identifies other groups by risks and needs. Nutrition, PA and obesity, and tobacco, are in the top seven priority areas identified by the CDC for large scale-impact on health with known effective strategies.⁴ The program size is based on existing budgeted positions and available funding, the functions and structure of the organization developed to meet the program measures.

H. Discussion of Program Revenues

The TSP/HHI relies on the DOH portion of the TSSF, "U" fund (USDA SNAP-Ed through DHS) and federal competitive grant funds.

I. Summary of Analysis Performed

The measures of effectiveness align with state plans and national recommendations, and were developed in collaboration with state agencies, nonprofits, healthcare, businesses, survivor organizations, policymakers, and concerned community members.

³ The Chronic Disease Cost Calculator, RTI International, Centers for Disease Control and Prevention in collaboration with Agency for Healthcare Research and Quality, National Association of Chronic Disease Directors, and National Pharmaceutical Council. Version 2.6.5058 build Nov 6, 2013.

⁴ CDC Winnable Battles. <http://www.cdc.gov/winnablebattles/>. Downloaded Nov 25, 2014.

J. Further Considerations

TSP/HHI re-organization to the Chronic Disease Prevention and Health Promotion Division was acknowledged on January 21, 2014.

OPERATING AND CAPITAL APPROPRIATIONS

REPORT P61-A

PROGRAM ID: **HTH595**
 PROGRAM STRUCTURE NO. **050106**
 PROGRAM TITLE: **HEALTH RESOURCES ADMINISTRATION**

PROGRAM EXPENDITURES	IN DOLLARS				IN THOUSANDS			
	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19	FY2019-20	FY2020-21
OPERATING COST	2.00*	2.00*	2.00*	2.00*	2.00*	2.00*	2.00*	2.00*
PERSONAL SERVICES	146,251	165,823	176,147	178,741	179	179	179	179
OTHER CURRENT EXPENSES	4,128	204,128	4,128	4,128	4	4	4	4
TOTAL OPERATING COST	150,379	369,951	180,275	182,869	183	183	183	183
BY MEANS OF FINANCING								
GENERAL FUND	2.00*	2.00*	2.00*	2.00*	2.00*	2.00*	2.00*	2.00*
	150,379	369,951	180,275	182,869	183	183	183	183
CAPITAL INVESTMENT APPROPRIATIONS								
PLANS		201,000						
DESIGN	50,000	800,000						
CONSTRUCTION	4,950,000	5,599,000						
TOTAL CAPITAL APPROPRIATIONS	5,000,000	6,600,000						
BY MEANS OF FINANCING								
G.O. BONDS	5,000,000	6,600,000						
TOTAL POSITIONS	2.00*	2.00*	2.00*	2.00*	2.00*	2.00*	2.00*	2.00*
TOTAL PROGRAM COST	5,150,379	6,969,951	180,275	182,869	183	183	183	183

PROGRAM ID: HTH595
 PROGRAM STRUCTURE: 050106
 PROGRAM TITLE: HEALTH RESOURCES ADMINISTRATION

	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21
<u>MEASURES OF EFFECTIVENESS</u>								
1. % MOE HRA PROG SHOWING BENEFICIAL CHGS (PL VS ACT)	36	36	36	36	36	36	36	36
<u>PROGRAM TARGET GROUPS</u>								
1. PERSONNEL IN HEALTH RESOURCES ADMINISTRATION	884.12	884.12	884.12	884.12	884.12	884.12	884.12	884.12

NOTE: PROGRAM REVENUES BY TYPE AND FUND MAY NOT BE ACCURATE DUE TO SYSTEM ERROR.

A. Statement of Program Objectives

To enhance program effectiveness and efficiency by formulating policies; directing operations and personnel; and providing administrative oversight in the areas of communicable disease, general medical and preventive services, emergency medical services and injury prevention system, and family health.

B. Description of Request and Compliance with Section 37-68 (1)(A)(B)

None.

C. Description of Activities Performed

All of the activities are administrative in nature and involve the setting of goals and policy direction for programs within the Health Resources Administration, which includes the Emergency Medical Services and Injury Prevention Systems Branch along with the Communicable Disease, Dental Health (including Public Health Nursing), Disease Outbreak Control, and Family Health Services Divisions.

D. Statement of Key Policies Pursued

Many federal and state statutory requirements, as well as internal policies, govern the programs in the Health Resources Administration (HRA). Policies are reviewed and amended to conform to ongoing needs.

E. Identification of Important Program Relationships

Programs within HRA collaborate on an ongoing basis to ensure that departmental resources are maximized and duplication is eliminated. HRA programs are also in communication with other state, county, and federal agencies. Public-private partnerships continue to increase with community agencies and interest groups.

F. Description of Major External Trends Affecting the Program

An ongoing element affecting HRA programs for the last decade has been the State's economy. The results of the high cost of living is seen in the growing numbers of uninsured individuals and homeless families and the decreasing accessibility to health care services for rural residents and low income persons throughout the state.

G. Discussion of Cost, Effectiveness and Program Size Data

The size and complexity of the Health Resources Administration makes it very difficult for each program ID to limit the measures of effectiveness, target groups and activity measures to ten of each. This results in the limitation of the overall measures to ones that have commonality among all the individual programs but may be somewhat nebulous and do not give a sense of each major program within those very large divisions that may cover diverse programs.

H. Discussion of Program Revenue

The Health Resources Administration, as part of core departmental infrastructure, when funded, is usually made up with entirely general funds.

I. Summary of Analysis Performed

None.

J. Further Considerations

None.

OPERATING AND CAPITAL APPROPRIATIONS

REPORT P61-A

PROGRAM ID: **HTH210**
 PROGRAM STRUCTURE NO. **050201**
 PROGRAM TITLE: **HAWAII HEALTH SYSTEMS CORP - CORP OFFICE**

PROGRAM EXPENDITURES	IN DOLLARS				IN THOUSANDS			
	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19	FY2019-20	FY2020-21
CURRENT LEASE PAYMENTS								
OTHER CURRENT EXPENSES	96,000	113,000	120,000	61,000	61	61	61	61
TOTAL CURRENT LEASE PAYMENTS C	96,000	113,000	120,000	61,000	61	61	61	61
BY MEANS OF FINANCING								
SPECIAL FUND	96,000	113,000	120,000	61,000	61	61	61	61
OPERATING COST	54.50*	54.50*	54.50*	54.50*	54.5*	54.5*	54.5*	54.5*
PERSONAL SERVICES	11,522,000	10,117,000	10,117,000	10,117,000	10,117	10,117	10,117	10,117
OTHER CURRENT EXPENSES	2,296,280	2,392,280	2,272,280	2,331,280	2,331	2,331	2,331	2,331
TOTAL OPERATING COST	13,818,280	12,509,280	12,389,280	12,448,280	12,448	12,448	12,448	12,448
BY MEANS OF FINANCING								
SPECIAL FUND	13,818,280	12,509,280	12,389,280	12,448,280	12,448	12,448	12,448	12,448
CAPITAL INVESTMENT APPROPRIATIONS								
EQUIPMENT	14,321,000	359,000						
TOTAL CAPITAL APPROPRIATIONS	14,321,000	359,000						
BY MEANS OF FINANCING								
G.O. BONDS	14,321,000	359,000						
TOTAL POSITIONS	54.50*	54.50*	54.50*	54.50*	54.50*	54.50*	54.50*	54.50*
TOTAL PROGRAM COST	28,235,280	12,981,280	12,509,280	12,509,280	12,509	12,509	12,509	12,509

PROGRAM ID: HTH210
 PROGRAM STRUCTURE: 050201
 PROGRAM TITLE: HAWAII HEALTH SYSTEMS CORPORATION - CORPORATE OFFICE

	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21
MEASURES OF EFFECTIVENESS								
1. BOARD APPROVED OPERATING EXPENSE BUDGET TO ACTUAL	12093	16611	18785	19474	19474	19474	19474	19474
PROGRAM REVENUES BY TYPE (IN THOUSANDS of DOLLARS)								
REVENUE FROM OTHER AGENCIES: FEDERAL	132,492	122,039	122,039	122,039	122,039	122,039	122,039	122,039
CHARGES FOR CURRENT SERVICES	386,393	386,009	386,007	386,007	386,007	386,007	386,007	386,007
NON-REVENUE RECEIPTS	8	8	8	8	8	8	8	8
TOTAL PROGRAM REVENUES	518,893	508,056	508,054	508,054	508,054	508,054	508,054	508,054
PROGRAM REVENUES BY FUND (IN THOUSANDS of DOLLARS)								
SPECIAL FUNDS	518,893	508,056	508,054	508,054	508,054	508,054	508,054	508,054
TOTAL PROGRAM REVENUES	518,893	508,056	508,054	508,054	508,054	508,054	508,054	508,054

NOTE: PROGRAM REVENUES BY TYPE AND FUND MAY NOT BE ACCURATE DUE TO SYSTEM ERROR.

A. Statement of Program Objectives

To sustain and enhance both the levels of service and the quality of care for the communities we serve in the most cost-effective fashion. HHSC and the regions of HHSC operate the primary acute care hospitals on the neighbor islands, and in many instances, provide the only in-patient acute hospital services and substantial long-term care services throughout Hawaii. The facilities of the HHSC include: Hilo Medical Center, Honokaa, and Kau (East Hawaii Region); Kona Community Hospital and Kohala (West Hawaii Region); Maui Memorial Medical Center, Lanai and Kula (Maui Region); Leahi and Maluhia (Oahu Region); West Kauai Medical Center/Kauai Veterans Memorial Hospital and Samuel Mahelona Memorial Hospital (Kauai Region).

B. Description of Request and Compliance with Section 37-68(1)(A)(B)

None.

C. Description of Activities Performed

Corporation: The major activities carried out by the HHSC Corporate Board of Directors and corporate management team include policy formulation, hospital system governance, business development, quality assurance, strategic direction, planning and coordination, financial management, legal counsel, personnel management, materials management, information systems, and technical services to support its community hospitals.

D. Statement of Key Policies Pursued

The key policies are dedication to excellence in providing accessible, comprehensive health care services that are quality driven, customer-focused, and cost effective. In addition, the regions and facilities strive to provide this care with a dedication to quality standards maintained through

the Joint Commission on the Accreditation of Healthcare Organizations (JCAHO) accreditation, where appropriate, Medicare/Medicaid certifications, and State licensure and health professional standards.

E. Identification of Important Program Relationships

Executive management is provided to the HHSC through the Corporation Board, Chief Executive Officer (CEO) and corporation staff. Regional management and advice is provided by the five regional system boards and the regional CEOs. All work with multiple hospitals, health care organizations, State government agencies and the Legislature, and the communities they serve.

F. Description of Major External Trends Affecting the Program

Refer to Program Plan Narrative HTH 212 Hawaii Health Systems Corporation – Regions.

G. Discussion of Cost, Effectiveness, and Program Size Data

Labor costs constitute about 63% of the HHSC budget. HHSC costs are high compared to national averages and are higher than those of local hospital competitors. While HHSC has been given limited authority to make memoranda of agreement and collective bargaining sub-agreements with Hawaii Government Employees Association (HGEA) and United Public Workers (UPW), HHSC is restricted from modifying salary and benefits and virtually precluded from outsourcing work. Pay raises for HHSC are negotiated by Office of Collective Bargaining, approved by the Administration, and then appropriated by the Legislature. Funding support from the state to cover the annually increasing cost is essential to sustain HHSC and its regions.

The high costs of fringe benefits, inability to out-source functions because of restrictions in law, restrictive work rules, lack of staff flexibility to work

load and inability to reduce or close services, because of restrictions in law, are financially detrimental to the HHSC regions and facilities.

Substantial existing liabilities (\$150 million or more) of the former Department of Health (DOH) Division of Community Hospitals were passed to HHSC when the Corporation was formed in 1996. These liabilities include inflated fringe benefit payments for insufficient pension funding, prior worker's compensation liabilities, prior accrual of employee benefits, overpayment reimbursements to the federal government, and over \$45 million in deferred maintenance and repair of facilities. The ability to pay for these liabilities, which were incurred prior to creation of HHSC, is critical to the future success of HHSC. HHSC has taken aggressive management actions to cope with these liabilities such as active management, including negotiated settlements, of millions of dollars of workers compensation claims to reduce prior claims liabilities and contracting for several millions of dollars in energy conservation performance contracting projects that has enabled HHSC to achieve substantial modernization of facilities at no increase in operating costs. Existing safety and operational shortfalls of HHSC facilities comprise the largest dollar value of liabilities existing prior to November 1996.

HHSC inherited from the DOH the responsibility of providing "free" or under-reimbursed services to the public as well as the obligation to provide quality health in rural areas. Substantial reduction or elimination of these services is not allowed under Act 262.

H. Discussion of Program Revenues

Fund sources for the Corporate Office are from the revenues generated by the facilities for providing services. Investment income may be generated from excess funds as they become available. Grant Funds and donations may be made directly to HHSC or to the Hawaii Health Systems Foundation (HHSF), a subsidiary of the HHSC created to support HHSC or any of the other eight Foundations associated with HHSC hospitals.

I. Summary of Analysis Performed

See Part G.

J. Further Considerations

None.

OPERATING AND CAPITAL APPROPRIATIONS

REPORT P61-A

PROGRAM ID: HTH211
 PROGRAM STRUCTURE NO. 050202
 PROGRAM TITLE: KAHUKU HOSPITAL

PROGRAM EXPENDITURES	IN DOLLARS				IN THOUSANDS			
	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19	FY2019-20	FY2020-21
OPERATING COSTS								
OTHER CURRENT EXPENSES	1,500,000	1,500,000	1,500,000	1,500,000	1,500	1,500	1,500	1,500
TOTAL OPERATING COST	1,500,000	1,500,000	1,500,000	1,500,000	1,500	1,500	1,500	1,500
BY MEANS OF FINANCING								
GENERAL FUND	1,500,000	1,500,000	1,500,000	1,500,000	1,500	1,500	1,500	1,500
CAPITAL INVESTMENT APPROPRIATIONS								
PLANS	1,000							
DESIGN	1,000							
CONSTRUCTION	1,459,000							
EQUIPMENT	1,000							
TOTAL CAPITAL APPROPRIATIONS	1,462,000							
BY MEANS OF FINANCING								
G.O. BONDS	1,462,000							
TOTAL POSITIONS	2,962,000*	1,500,000*	1,500,000*	1,500,000*	1,500*	1,500*	1,500*	1,500*
TOTAL PROGRAM COST	2,962,000	1,500,000	1,500,000	1,500,000	1,500	1,500	1,500	1,500

PROGRAM ID: HTH211
 PROGRAM STRUCTURE: 050202
 PROGRAM TITLE: KAHUKU HOSPITAL

	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21
MEASURES OF EFFECTIVENESS								
1. OCCUPANCY RATE - ACUTE CARE	91	90	90	90	90	90	90	90
2. OCCUPANCY RATE - LONG-TERM CARE	100	100	100	100	100	100	100	100
3. AVERAGE LENGTH OF STAY - ACUTE CARE (DAYS)	26.8	26.2	26.2	26.2	26.2	26.2	26.2	26.2
4. AVERAGE LENGTH OF STAY - LONG-TERM CARE (DAYS)	1153	1155	1155	1155	1155	1155	1155	1155
5. AVERAGE OPERATING COST PER PATIENT DAY(EXCL EQUIP)	803	855	855	855	855	855	855	855
6. AVERAGE PATIENT REVENUE PER PATIENT DAY	1514	1495	1495	1495	1495	1495	1495	1495
PROGRAM TARGET GROUPS								
1. EST. POPULATION OF SERVICE AREA (RESIDENTS)	22500	22500	22500	22500	22500	22500	22500	22500
PROGRAM ACTIVITIES								
1. NUMBER OF IN-PATIENT ADMISSIONS - ACUTE CARE	135	150	150	150	150	150	150	150
2. NUMBER OF IN-PATIENT DAYS - ACUTE CARE	3827	3945	3945	3945	3945	3945	3945	3945
3. NUMBER OF EMERGENCY ROOM VISITS	5657	5800	5800	5800	5800	5800	5800	5800
4. NUMBER OF ADMISSIONS - LONG-TERM CARE	2	3	3	3	3	3	3	3
5. NUMBER OF PATIENT DAYS - LONG-TERM CARE	3459	3284	3284	3284	3284	3284	3284	3284

NOTE: PROGRAM REVENUES BY TYPE AND FUND MAY NOT BE ACCURATE DUE TO SYSTEM ERROR.

A. STATEMENT OF PROGRAM OBJECTIVES

To sustain and enhance both the levels of service and the quality of care delivered to the north shore communities on the island of Oahu. Kahuku Medical Center provides medical care in the most cost-effective manner and operates a critical access hospital providing acute hospital services, skilled nursing services, a 24-hour emergency department, and supportive diagnostic/ancillary services.

B. DESCRIPTION OF REQUESTS AND COMPLIANCE WITH SECTION 37-68(1)(A)(B)

Not applicable.

C. DESCRIPTION OF ACTIVITIES PERFORMED

Facilities. The major activities and service provided by the Kahuku Medical Center Board and medical center leadership team constitute the primary hospital acute care provider on the north shore of the island of Oahu. Inpatient services include medical, limited pediatric and long-term care (SNF/ICF). Outpatient/clinical care services include emergency room services, nursing, central supply, radiology, pathology, speech, physical and occupational therapy, social services, pharmacy, and dietary. Support services include administration, admitting, business, human resources, medical records, logistics, housekeeping, and maintenance.

D. STATEMENT OF KEY POLICIES PURSUED

The key policies are dedication to excellence in providing accessible, comprehensive health care services that are quality driven, customer-focused, and cost effective. In addition, Kahuku Medical Center strives to provide this care with a dedication to quality standards maintained through

anticipated The Joint Commission (TJC) accreditation, where appropriate, Medicare/Medicaid certifications, and State licensure and health professional standards.

E. IDENTIFICATION OF IMPORTANT PROGRAM RELATIONSHIPS

Medical Center leadership and advice is provided by the Kahuku Medical Center board. Kahuku Medical Center partners with multiple hospitals, health care organizations, State government agencies and the Legislature, and the communities served.

F. DESCRIPTION OF MAJOR EXTERNAL TRENDS AFFECTING THE PROGRAM

Significant external trends having potential impact on Kahuku Medical Center include, but are not limited to:

- The national and state economic recessions are affecting local economies throughout the communities served by Kahuku Medical Center. As a result, demands for services from uninsured and underinsured patients are forecasted to increase, which is expected to create greater financial challenges that may not be fully reflected in the budget requirements for Kahuku Medical Center being submitted for this biennium budget.
- The constant pressure to reduce reimbursements in both the federal and state Medicare and Medicaid/QUEST programs. Inherent in this is the trend to reduce costly in-patient and emergency room utilization.
- The increasing competition for scarce health care resources including limited reimbursement dollars, the need for qualifies

health care professionals, and the encroachment of national corporations into the state, including the neighbor islands.

Most severe current trends are the necessities for paying physicians to provide emergency physician services and specialty physician on-call services at Kahuku Medical Center's emergency department. These costs are forecasted to continue to escalate.

The increasing costs of health care in general, and particularly in rural areas, with the related increase in the reliance on high-cost technology and complex information systems.

An aging physical plant requiring immediate replacement and refurbishing of major infrastructure support systems have also affected the Kahuku Medical Center.

Lastly, commercial health plans payments to providers are not keeping pace with cost inflation and may continue to lag, because of the impact of the Hawaii pre-paid healthcare act on the market.

G. DISCUSSION OF COST, EFFECTIVENESS, AND PROGRAM SIZED DATA Threats to Kahuku Medical Center

An aging physical plant could potentially interfere with patient care (leaking roof, air conditioning). The ability to attract qualified health care professionals in all fields to provide excellent quality care is always a challenge.

H. DISCUSSION OF PROGRAM REVENUE

Fund sources are State general funds and revenues generated by providing services deposited into the special funds account. Investment income may be generated from excess funds as they become available.

Grant funds and donations may be made directly to the Kahuku Medical Center.

I. SUMMARY OF ANALYSIS PERFORMED

See Part G.

J. FURTHER CONSIDERATIONS

None.

OPERATING AND CAPITAL APPROPRIATIONS

REPORT P61-A

PROGRAM ID: HTH212
 PROGRAM STRUCTURE NO. 050203
 PROGRAM TITLE: HAWAII HEALTH SYSTEMS CORPORATION - REGI

PROGRAM EXPENDITURES	IN DOLLARS				IN THOUSANDS			
	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19	FY2019-20	FY2020-21
CURRENT LEASE PAYMENTS								
OTHER CURRENT EXPENSES	14,285,000	14,005,000	12,370,000	10,835,000	10,835	10,835	10,835	10,835
TOTAL CURRENT LEASE PAYMENTS C	14,285,000	14,005,000	12,370,000	10,835,000	10,835	10,835	10,835	10,835
BY MEANS OF FINANCING								
SPECIAL FUND	14,285,000	14,005,000	12,370,000	10,835,000	10,835	10,835	10,835	10,835
OPERATING COST	2,780.75*	2,780.75*	2,780.75*	2,780.75*	2,780.8*	2,780.8*	2,780.8*	2,780.8*
PERSONAL SERVICES	399,012,882	374,210,000	476,459,000	502,716,000	502,716	502,716	502,716	502,716
OTHER CURRENT EXPENSES	203,028,900	212,403,900	137,738,536	118,959,474	118,959	118,959	118,959	118,959
TOTAL OPERATING COST	602,041,782	586,613,900	614,197,536	621,675,474	621,675	621,675	621,675	621,675
BY MEANS OF FINANCING								
GENERAL FUND	82,940,000	89,940,000	84,940,000	84,940,000	84,940	84,940	84,940	84,940
SPECIAL FUND	2,780.75*	2,780.75*	2,780.75*	2,780.75*	2,780.8*	2,780.8*	2,780.8*	2,780.8*
	519,101,782	496,673,900	529,257,536	536,735,474	536,735	536,735	536,735	536,735
CAPITAL INVESTMENT APPROPRIATIONS								
PLANS	1,000	2,001,000	40,000	40,000				
DESIGN	1,000	6,031,000	918,000	1,052,000				
CONSTRUCTION	39,997,000	63,368,000	8,842,000	10,376,000				
EQUIPMENT	1,000	8,700,000	2,200,000	532,000				
TOTAL CAPITAL APPROPRIATIONS	40,000,000	80,100,000	12,000,000	12,000,000				
BY MEANS OF FINANCING								
G.O. BONDS	40,000,000	45,100,000	12,000,000	12,000,000				
REVENUE BONDS		31,500,000						
FEDERAL FUNDS		3,500,000						
TOTAL POSITIONS	2,780.75*	2,780.75*	2,780.75*	2,780.75*	2,780.80*	2,780.80*	2,780.80*	2,780.80*
TOTAL PROGRAM COST	656,326,782	680,718,900	638,567,536	644,510,474	632,510	632,510	632,510	632,510

PROGRAM ID: HTH212
 PROGRAM STRUCTURE: 050203
 PROGRAM TITLE: HAWAII HEALTH SYSTEMS CORPORATION - REGIONS

	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21
MEASURES OF EFFECTIVENESS								
1. AVERAGE OPERATING COST PER PATIENT DAY (EXCL EQPT)	1867	1854	2013	2109	2109	2109	2109	2109
2. AVERAGE PATIENT REVENUE PER PATIENT DAY	1523	1586	1602	1630	1630	1630	1630	1630
3. OCCUPANCY RATE - ACUTE CARE	65.69	60.46	60.46	60.46	60.46	60.46	60.46	60.46
4. OCCUPANCY RATE - LONG-TERM CARE	82.97	86.64	88.64	88.64	88.64	88.64	88.64	88.64
PROGRAM TARGET GROUPS								
1. EST. POPULATION OF SERVICE AREA - EAST HAWAII	118309	119729	119729	119729	119729	119729	119729	119729
2. EST. POPULATION OF SERVICE AREA - WEST HAWAII	72512	73382	73382	73382	73382	73382	73382	73382
3. EST. POPULATION OF SERVICE AREA - MAUI	160292	162536	162536	162536	162536	162536	162536	162536
4. EST. POPULATION OF SERVICE AREA - KAUAI	69512	70624	70624	70624	70624	70624	70624	70624
5. EST. POPULATION SERVICE AREA OVER 65 - EAST HAWAII	19827	20065	20065	20065	20065	20065	20065	20065
6. EST. POPULATION SERVICE AREA OVER 65 - WEST HAWAII	12152	12298	12298	12298	12298	12298	12298	12298
7. EST. POPULATION SERVICE AREA OVER 65 - MAUI	23582	23912	23912	23912	23912	23912	23912	23912
8. EST. POPULATION SERVICE AREA OVER 65 - OAHU	152308	153679	153679	153679	153679	153679	153679	153679
9. EST. POPULATION SERVICE AREA OVER 65 - KAUAI	11688	11875	11875	11875	11875	11875	11875	11875
PROGRAM ACTIVITIES								
1. NUMBER OF IN-PATIENT ADMISSIONS - ACUTE CARE	22354	22120	22120	22120	22120	22120	22120	22120
2. NUMBER OF IN-PATIENT DAYS - ACUTE CARE	114807	112325	112325	112325	112325	112325	112325	112325
3. NUMBER OF BIRTHS	3631	3605	3605	3605	3605	3605	3605	3605
4. NUMBER OF ADMISSIONS - LONG-TERM CARE	1219	1212	1212	1212	1212	1212	1212	1212
5. NUMBER OF PATIENT DAYS - LONG-TERM CARE	243620	245392	245392	245392	245392	245392	245392	245392
6. NUMBER OF EMERGENCY ROOM (ER) VISITS	127264	12700	12700	12700	12700	12700	12700	12700

NOTE: PROGRAM REVENUES BY TYPE AND FUND MAY NOT BE ACCURATE DUE TO SYSTEM ERROR.

A. Statement of Program Objectives

To sustain and enhance both the levels of service and the quality of care for the communities we serve in the most cost-effective fashion. The regions of HHSC operate the primary acute care hospitals on the neighbor islands, and, in many instances, provide the only in-patient acute hospital services and substantial long-term care services throughout Hawaii. The facilities of the HHSC include: Hilo Medical Center, Honokaa, and Kau (East Hawaii Region); Kona Community Hospital and Kohala (West Hawaii Region); Maui Memorial Medical Center, Lanai and Kula (Maui Region); Leahi and Maluhia (Oahu Region); West Kauai Medical Center/Kauai Veterans Memorial Hospital and Samuel Mahelona Memorial Hospital (Kauai Region).

B. Description of Request and Compliance with Section 37-68(1)(A)(B)

Lump Sum CIP request of \$12,000,000 in general obligation bond funds in each of the biennium fiscal years for the life and safety projects for all HHSC facilities.

C. Description of Activities Performed

The major activities and service provided by the five Regional System Boards, regional management teams and the twelve community facilities constitute the primary hospital acute care provider on the neighbor islands, and, in most instances, the only in-patient hospital services in rural locations. Acute inpatient services include surgical, medical, critical care, obstetrics, pediatric, and psychiatric care. Outpatient care services include ambulatory surgery, home health, and emergency room services. Clinical services include nursing, anesthesiology, central supply, radiology, oncology, pathology, respiratory therapy, physical and occupational therapy, social services, pharmacy, and dietary. Support

services include administration, admitting, business, personnel, data processing, medical records, logistics, housekeeping, and maintenance.

D. Statement of Key Policies Pursued

The key policy includes the dedication to excellence in providing accessible, comprehensive health care services that are quality driven, customer-focused, and cost effective. In addition, the regions and facilities strive to provide this care with a dedication to quality standards maintained through JCAHO accreditation, where appropriate, Medicare/Medicaid certifications, and State licensure and health professional standards.

E. Identification of Important Program Relationships

Executive management is provided to the HHSC through the Corporation Board, CEO and corporation staff. Regional management and advice is provided by the five regional system boards and the regional Chief Executive Officers. All work with multiple hospitals, health care organizations, State government agencies and the Legislature, and the communities they serve.

F. Description of Major External Trends Affecting the Program

Significant external trends having potential impact on HHSC include, but are not limited to:

- The national and state economic recessions are affecting local economies throughout the communities served by HHSC regions and facilities. As a result, demands for services from uninsured and underinsured patients are forecast to increase, which is expected to create greater financial challenges that may not be fully reflected in

the budget requirements for HHSC regions being submitted for this biennium budget.

- The constant pressure to reduce reimbursements in both the federal and state Medicare and Medicaid/QUEST programs. Inherent in this is the trend to reduce costly in-patient and emergency room utilization.
- The increasing competition for scarce health care resources including limited reimbursement dollars, the need for qualified health care professionals, and the encroachment of national corporations into the state, including the neighbor islands.

Most severe current trends are the necessities for paying physicians to provide emergency physician services and specialty physician on-call services at HHSC's ten emergency departments and to work as hospitalists in HHSC hospitals to take care of in patients. These costs are forecast to continue to escalate.

The increasing costs of health care in general, and particularly in rural areas, with the related increase in the reliance on high-cost technology and complex information systems.

Commercial health plans payments to providers are not keeping pace with cost inflation and may continue to lag, because of the impact of the Hawaii pre-paid healthcare act on the market.

Lastly, the passage of federal health care reform as part of Patient Protection and Affordable Care Act (PPACA) will have a tremendous impact on how health care is provided in the U.S. It is still unclear what the exact impact of all of the provisions of the PPACA will have on HHSC, but it is estimated that the marketbasket reductions alone will have a significant detrimental impact to reimbursements for HHSC's three acute care facilities.

G. Discussion of Cost, Effectiveness, and Program Size Data
Refer to Program Plan Narrative HTH 210 Hawaii Health Systems Corporation – Corporate Office.

H. Discussion of Program Revenues

Fund sources are State general funds and revenues generated by providing services deposited into the special funds account. Investment income may be generated from excess funds as they become available. Grant funds and donations may be made directly to HHSC or to the Hawaii Health Systems Foundation (HHSF), a subsidiary of the HHSC created to support HHSC or any of the other eight Foundations associated with HHSC hospitals

I. Summary of Analysis Performed

See Part G.

J. Further Considerations

None.

OPERATING AND CAPITAL APPROPRIATIONS

REPORT P61-A

PROGRAM ID: **HTH213**
 PROGRAM STRUCTURE NO. **050204**
 PROGRAM TITLE: **ALII COMMUNITY CARE**

PROGRAM EXPENDITURES	IN DOLLARS				IN THOUSANDS			
	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19	FY2019-20	FY2020-21
OPERATING COSTS								
OTHER CURRENT EXPENSES	2,500,000	2,500,000	2,500,000	2,500,000	2,500	2,500	2,500	2,500
TOTAL OPERATING COST	2,500,000	2,500,000	2,500,000	2,500,000	2,500	2,500	2,500	2,500
BY MEANS OF FINANCING								
SPECIAL FUND	2,500,000	2,500,000	2,500,000	2,500,000	2,500	2,500	2,500	2,500
TOTAL POSITIONS	2,500,000*	2,500,000*	2,500,000*	2,500,000*	2,500*	2,500*	2,500*	2,500*
TOTAL PROGRAM COST	2,500,000	2,500,000	2,500,000	2,500,000	2,500	2,500	2,500	2,500

PROGRAM ID: HTH213
 PROGRAM STRUCTURE: 050204
 PROGRAM TITLE: ALII COMMUNITY CARE

	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21
MEASURES OF EFFECTIVENESS								
1. NEW PROGRAM ESTABLISHED BY 2011 LEGISLATURE	NO DATA	NO DATA	NO DATA	NO DATA	NO DATA	NO DATA	NO DATA	NO DATA

NOTE: PROGRAM REVENUES BY TYPE AND FUND MAY NOT BE ACCURATE DUE TO SYSTEM ERROR.

A. Statement of Program Objectives

Provide quality assisted living services to residents of Maui County and quality outpatient physician services to the residents of West Hawaii through Alii Community Care, Inc., a 501(c) (3) organization.

B. Description of Request and Compliance with Section 37-68(1)(A)(B)

Not applicable.

C. Description of Activities Performed

Alii Community Care operates two health care facilities. Roselani Place is a 114 bed assisted living facility in Kahului. Roselani Place provides residential memory care services in addition to independent living. Alii Health Center is located in Kona, Hawaii. Alii Health Center is a multi-physician clinic providing primary care and sub-specialty care physician services in an outpatient clinic setting.

D. Statement of Key Policies Pursued

Roselani Place and Alii Health Center is committed to providing quality services in the respective communities they are located. Both operations have achieved the required licenses and certifications necessary to demonstrate operational excellence.

E. Identification of Important Program Relationships

Executive management is provided through the Alii Community Care Board, facility management staff, and the HHSC Board (sole member).

F. Description of Major External Trends Affecting the Program

Alii Community Care, Inc. continues to face challenges related to the operations of Roselani Place and Alii Health Center. In particular, primary care physicians are in short supply in Kona and present a recruiting challenge for Alii Health Center.

G. Discussion of Cost, Effectiveness, and Program Size Data

Operational costs for Roselani Place and Alii Health Center are in line with their respective budgets. Roselani Place's resident census is behind budget and as such continues to experience a negative profit margin. Alii Health Center is in an expansion mode so its operating margin is also negative. Alii Health Center does impact Kona Community Hospital positively through referral income as Alii physicians use the hospital exclusively for inpatient and outpatient services. At this time, Alii Community Care requires a minimum of \$2.5 million dollars in subsidy from HHSC.

H. Discussion of Program Revenues

Fund sources for Alii Community Care are rental income from Roselani Place residents, insurance and patient payments for clinic services provided at Alii Health Center, subsidy from HHSC, and miscellaneous grants.

I. Summary of Analysis Performed

See Part G.

J. Further Considerations

None.

OPERATING AND CAPITAL APPROPRIATIONS

REPORT P61-A

PROGRAM ID: HTH420
 PROGRAM STRUCTURE NO. 050301
 PROGRAM TITLE: ADULT MENTAL HEALTH - OUTPATIENT

PROGRAM EXPENDITURES	IN DOLLARS				IN THOUSANDS			
	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19	FY2019-20	FY2020-21
OPERATING COST	145.50*	145.50*	151.50*	151.50*	151.5*	151.5*	151.5*	151.5*
PERSONAL SERVICES	16,713,504	16,713,504	18,247,901	18,783,210	18,785	18,785	18,785	18,785
OTHER CURRENT EXPENSES	69,339,388	55,235,388	55,235,388	55,235,388	55,234	55,234	55,234	55,234
MOTOR VEHICLE		185,000						
TOTAL OPERATING COST	86,052,892	72,133,892	73,483,289	74,018,598	74,019	74,019	74,019	74,019
BY MEANS OF FINANCING								
GENERAL FUND	145.50*	145.50*	151.50*	151.50*	151.5*	151.5*	151.5*	151.5*
SPECIAL FUND	72,810,662	58,706,662	60,241,059	60,776,368	60,776	60,776	60,776	60,776
FEDERAL FUNDS	11,610,000	11,795,000	11,610,000	11,610,000	11,611	11,611	11,611	11,611
	*	*	*	*	*	*	*	*
TOTAL POSITIONS	145.50*	145.50*	151.50*	151.50*	151.50*	151.50*	151.50*	151.50*
TOTAL PROGRAM COST	86,052,892	72,133,892	73,483,289	74,018,598	74,019	74,019	74,019	74,019

PROGRAM ID: HTH420
 PROGRAM STRUCTURE: 050301
 PROGRAM TITLE: ADULT MENTAL HEALTH - OUTPATIENT

	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21
MEASURES OF EFFECTIVENESS								
1. % CONSUMERS LIVING INDEPENDENTLY	57	57	57	57	58	58	58	58
2. % CONSUMERS EMPLOYED	10	12	12	12	13	13	13	14
3. % SATISFIED CONSUMERS	95	95	95	95	95	95	95	95
PROGRAM TARGET GROUPS								
1. EST PREVAL ADULTS W/SEVERE PERSIST MENTAL ILLNESS	28510	28800	29000	29300	29600	29900	30200	30500
2. # PERS SERVED IN CRISIS SERVICES	2708	2800	2900	2930	2960	2990	3020	3050
PROGRAM ACTIVITIES								
1. # CONSUMERS SERVED: CMHCS	2688	3800	3850	3900	3950	4000	4050	4100
2. # CONSUMERS SERVED: POS PROGRAMS	7845	7900	7950	8000	8050	8100	8150	8200
3. # ELIGIBILITY DETERMINATIONS PERFORMED	1040	1100	1100	1150	1150	1200	1200	1250
4. # CMHC ADMISSIONS	1093	1200	1200	1250	1250	1300	1300	1350
5. # CMHC DISCHARGES	1300	1300	1300	1350	1350	1400	1400	1450
6. # CONSUMERS SERVED: SPEC RESIDENTIAL SERVICES	129	140	140	140	140	140	140	140
7. # CONSUMERS SERVED: GROUP HOME SERVICES	679	710	710	710	710	710	710	710
PROGRAM REVENUES BY TYPE (IN THOUSANDS of DOLLARS)								
REVENUE FROM OTHER AGENCIES: FEDERAL	1,484	1,542	1,541	1,541	1,541	1,541	1,541	1,541
CHARGES FOR CURRENT SERVICES	7,250	6,000	6,000	6,000	6,000	6,000	6,000	6,000
NON-REVENUE RECEIPTS	4	4	4	4	4	4	4	4
TOTAL PROGRAM REVENUES	8,738	7,546	7,545	7,545	7,545	7,545	7,545	7,545
PROGRAM REVENUES BY FUND (IN THOUSANDS of DOLLARS)								
SPECIAL FUNDS	8,738	7,546	7,545	7,545	7,545	7,545	7,545	7,545
TOTAL PROGRAM REVENUES	8,738	7,546	7,545	7,545	7,545	7,545	7,545	7,545

NOTE: PROGRAM REVENUES BY TYPE AND FUND MAY NOT BE ACCURATE DUE TO SYSTEM ERROR.

A. Statement of Program Objective

Reduce the severity of disability due to mental illness through provision of community-based services including goal-oriented outpatient services, case management services, rehabilitation services, crisis intervention services, and community housing opportunities.

B. Description of Request and Compliance with Section 37-68(1)(A)(B)

Various transfer/tradeoff to implement reorganization acknowledged February 2014 (0.00/\$0 A; 0.00/\$0 A), (0.00/\$0 B; 0.00/\$0 B).

C. Description of Activities Performed

Major activities carried out to achieve program effectiveness will continue to be performed by the Community Mental Health Centers (CMHCs), the Courts Branch, and purchase of service (POS) providers.

1. Outpatient and Case Management Services – An assessment/evaluation is performed for each person entering the mental health system and a treatment/recovery plan is prepared. Case management services assist people to achieve success in community living by providing linkages to appropriate programs.
2. Psychosocial Rehabilitation – This program is designed to help a person learn to rehabilitate in the community. Research is showing that rehabilitation services are one of the cornerstones of effective community placement.
3. Residential Services – A broad spectrum of housing options ranging from highly structured supervised facilities to totally independent residences and supported housing continue to be developed.

4. Treatment Services – Four levels of treatment services are provided including inpatient services, specialized residential, intensive outpatient services, and outpatient services.
5. Crisis Intervention Services – These services ensure that individuals experiencing acute and severe mental health problems receive prompt, intensive, and focused services designed to assess, stabilize, and provide linkage to other services as appropriate.
6. Billing – The Adult Mental Health Division (AMHD) is actively pursuing all sources of revenue including the Medicaid Rehabilitation Option (MRO).

D. Statement of Key Policies Pursued

1. Improve the accessibility, availability, and acceptability of services.
2. Ensure and oversee the provision of quality comprehensive mental health services.
3. Continued input from community and other human service deliverers in identifying needs and problems and working together to solve identified problems.
4. Continued utilization of revenue generated to refine programs and services provided.

E. Identification of Important Program Relationships

1. The AMHD maintains interagency relationships with the Hawaii Public Housing Authority and the Department of Public Safety.
2. The Department of Human Services – to facilitate referrals, placements, and services of eligible persons under the MRO.
3. General hospitals licensed as psychiatric inpatient facilities – in relation to the appropriate kinds of patients to be cared for by each facility.
4. Circuit, District, and Family Courts – relative to the admission and discharge of involuntary patients and transfers to correctional facilities.

F. Description of Major External Trends Affecting the Program

1. Fiscal constraints at the Federal and State levels.
2. The influence of the Federal government in shaping the direction of programs and public policy including the President's New Freedom Commission and Community Mental Health Services Block Grant requirements.
3. Policies and procedures established within other agencies.
4. Fluctuations in the supply of appropriately qualified technical, professional, and paraprofessional staff relative to mental health services.
5. Impact of the "ice" epidemic on persons with severe and persistent mental illness.

G. Discussion of Cost, Effectiveness, and Program Size Data

Discrepancies between the previously planned levels and those actually achieved reflected in the cost data are due to the transition of consumers back to their QUEST health plans and the referral of consumers to their commercial health plans for continuing mental health services.

H. Discussion of Program Revenue

Active pursuit of all sources of revenue for the provision of mental health services is continuing including revenue from the MRO.

I. Summary of Analysis Performed

None.

J. Further Considerations

There is a continuing need to maintain consumers in the community by supplying adequate services to completely support the consumers. The cost of appropriate residential, community support, and structured psychosocial rehabilitation services cost considerably less than the cost of hospitalization.

OPERATING AND CAPITAL APPROPRIATIONS

REPORT P61-A

PROGRAM ID: **HTH430**
 PROGRAM STRUCTURE NO. **050302**
 PROGRAM TITLE: **ADULT MENTAL HEALTH - INPATIENT**

PROGRAM EXPENDITURES	IN DOLLARS				IN THOUSANDS			
	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19	FY2019-20	FY2020-21
OPERATING COST	615.00*	615.00*	615.00*	615.00*	615.0*	615.0*	615.0*	615.0*
PERSONAL SERVICES	35,343,719	35,343,719	38,833,615	39,641,920	39,642	39,642	39,642	39,642
OTHER CURRENT EXPENSES	17,551,938	22,655,938	22,655,938	22,655,938	22,656	22,656	22,656	22,656
TOTAL OPERATING COST	52,895,657	57,999,657	61,489,553	62,297,858	62,298	62,298	62,298	62,298
BY MEANS OF FINANCING								
GENERAL FUND	52,895,657	57,999,657	61,489,553	62,297,858	62,298	62,298	62,298	62,298
CAPITAL INVESTMENT APPROPRIATIONS								
DESIGN	800,000	2,501,000						
CONSTRUCTION	2,950,000	784,000						
TOTAL CAPITAL APPROPRIATIONS	3,750,000	3,285,000						
BY MEANS OF FINANCING								
G.O. BONDS	3,750,000	3,285,000						
TOTAL POSITIONS	615.00*	615.00*	615.00*	615.00*	615.00*	615.00*	615.00*	615.00*
TOTAL PROGRAM COST	56,645,657	61,284,657	61,489,553	62,297,858	62,298	62,298	62,298	62,298

PROGRAM ID: HTH430
 PROGRAM STRUCTURE: 050302
 PROGRAM TITLE: ADULT MENTAL HEALTH - INPATIENT

	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21
MEASURES OF EFFECTIVENESS								
1. % CLIENTS DISCHARGED TO COMMUNITY-BASED SVCS	64	64	64	64	64	64	64	64
2. % CLIENTS TREATED/DISCH W/CONT COMM TENURE > 12 MO	14	14	14	14	14	14	14	14
3. % CLIENTS TRANSFERRED TO A CONTRACT FACILITY	22	22	22	22	22	22	22	22
PROGRAM TARGET GROUPS								
1. # PENAL COMMITMENT PATIENTS	298	320	320	320	320	320	320	320
2. # CIVIL COMMITMENT PATIENTS	3	8	8	8	8	8	8	8
PROGRAM ACTIVITIES								
1. # NEW ADMISSIONS	131	128	128	128	128	128	128	128
2. # READMISSIONS	170	200	200	200	200	200	200	200
3. # DISCHARGES	292	316	316	316	316	316	316	316
4. # FORENSIC/COURT-ORDERED ADMISSIONS	301	328	328	328	328	328	328	328
PROGRAM REVENUES BY TYPE (IN THOUSANDS of DOLLARS)								
CHARGES FOR CURRENT SERVICES	117	117	117	117	117	117	117	117
TOTAL PROGRAM REVENUES	117	117	117	117	117	117	117	117
PROGRAM REVENUES BY FUND (IN THOUSANDS of DOLLARS)								
GENERAL FUNDS	117	117	117	117	117	117	117	117
TOTAL PROGRAM REVENUES	117	117	117	117	117	117	117	117

NOTE: PROGRAM REVENUES BY TYPE AND FUND MAY NOT BE ACCURATE DUE TO SYSTEM ERROR.

A. Statement of Program Objective(s)

Reduce the severity of disability due to severe mental illness through provision of inpatient and outpatient care with the ultimate goal of community reintegration.

B. Description of Request and Compliance with Section 37-68(1)(A)(B)

None.

C. Description of Activities Performed

1. Inpatient Psychiatric Care and Interdisciplinary Services

Provides safe, integrated, evidence-based psychiatric and interdisciplinary treatment and rehabilitation to individuals suffering from mental illness and co-occurring disorders. Interdisciplinary services include psychiatric, medical, psychological, nursing, social work, occupational therapy, recreational therapy, psychosocial rehabilitation, laboratory, pharmacy, and pastoral care.

2. Support Services

Provides support services to the hospital including the Business Office, Personnel or Human Resources, Telecommunications and Information Management, Volunteer Services, Dietary Services, and Plant Technology and Safety.

3. Quality Management Services

Provides quality management services including performance improvement, risk assessment and management, staff development and education, medical records, and patients' rights.

4. Maintenance of Department of Health licensing and Joint Commission accreditation.

D. Statement of Key Policies Pursued

1. Admit only those individuals that are court ordered or severe and persistently mentally ill (SPMI) needing an acute hospital level of care and place other referrals in a safe and appropriate, less restrictive setting.
2. Discharge patients to the least restrictive environments as soon as possible.
3. Collaborate with the Community Mental Health Centers and other community treatment teams to provide services across the continuum of care for the patients served by Hawaii State Hospital (HSH).
4. Continue to attempt to control costs through census management, process improvement, and efficiency in operations.

E. Identification of Important Program Relationships

1. Circuit, District and Family Courts are important referral sources of SPMI patients appropriate for placement within the continuum of care provided by the Adult Mental Health Division (AMHD) and specifically for inpatient psychiatric admission.
2. Community general hospitals with inpatient psychiatric facilities and psychiatric hospitals are also important referral sources of patients for appropriate placement within the continuum of care provided by AMHD and possibly to inpatient services at HSH.

3. The Department of Public Safety cares for some SPMI patients while they are being adjudicated. HSH coordinates and collaborates with and accepts patients through court commitment and as transfers.

F. Description of Major External Trends Affecting the Program

Healthcare, pharmacy, and acute continuing inpatient psychiatric service costs continue to increase and keeping pace with those increasing costs are essential. The shortage of available/open beds in appropriate community-based programs makes it difficult to control the HSH census. The shortage of nurses and physicians could impact the program into the future. Utilities and other related operating costs also continue to rise.

G. Discussion of Cost, Effectiveness, and Program Size Data

Costs to operate the hospital will continue to rise with the economic influences currently being experienced. Successful management of the patient census level is paramount. Allocated resources will continue to decline as hospital costs increase.

H. Discussion of Program Revenue

The continued implementation by AMHD and the revising of Hawaii Administrative Rules on HSH's daily rate will assist in revenue collection.

I. Summary of Analysis Performed

None.

J. Further Considerations

None.

OPERATING AND CAPITAL APPROPRIATIONS

REPORT P61-A

PROGRAM ID: **HTH440**
 PROGRAM STRUCTURE NO. **050303**
 PROGRAM TITLE: **ALCOHOL & DRUG ABUSE**

PROGRAM EXPENDITURES	IN DOLLARS				IN THOUSANDS			
	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19	FY2019-20	FY2020-21
OPERATING COST	28.00*	28.00*	28.00*	28.00*	28.0*	28.0*	28.0*	28.0*
PERSONAL SERVICES	2,361,600	2,361,600	2,686,632	2,764,376	2,765	2,765	2,765	2,765
OTHER CURRENT EXPENSES	31,006,106	30,576,106	33,185,232	33,185,232	33,184	33,184	33,184	33,184
TOTAL OPERATING COST	33,367,706	32,937,706	35,871,864	35,949,608	35,949	35,949	35,949	35,949
BY MEANS OF FINANCING								
GENERAL FUND	22.00*	22.00*	22.00*	22.00*	22.0*	22.0*	22.0*	22.0*
SPECIAL FUND	19,005,362	18,575,362	18,731,332	18,784,583	18,784	18,784	18,784	18,784
FEDERAL FUNDS	500,000	500,000	500,000	500,000	500	500	500	500
OTHER FEDERAL FUNDS	6.00*	6.00*	6.00*	6.00*	6.0*	6.0*	6.0*	6.0*
	7,915,082	7,915,082	8,204,680	8,229,173	8,229	8,229	8,229	8,229
	*	*	*	*	*	*	*	*
	5,947,262	5,947,262	8,435,852	8,435,852	8,436	8,436	8,436	8,436
CAPITAL INVESTMENT APPROPRIATIONS								
CONSTRUCTION		1,500,000						
TOTAL CAPITAL APPROPRIATIONS		1,500,000						
BY MEANS OF FINANCING								
G.O. BONDS		1,500,000						
TOTAL POSITIONS	28.00*	28.00*	28.00*	28.00*	28.00*	28.00*	28.00*	28.00*
TOTAL PROGRAM COST	33,367,706	34,437,706	35,871,864	35,949,608	35,949	35,949	35,949	35,949

PROGRAM ID: HTH440
 PROGRAM STRUCTURE: 050303
 PROGRAM TITLE: ALCOHOL AND DRUG ABUSE

	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21
MEASURES OF EFFECTIVENESS								
1. % OF INDIVIDUALS SUCCESSFULLY COMPLETING TX SVCS	45	49	49	49	49	49	49	49
2. % IND'LS REC'D CURR-BASED PREV SVS RPT SA ABSTINEN	95	95	95	95	95	95	95	95
3. # INDIVIDUALS OBTAIN/MAINTAIN THEIR SA PROF CERT	846	850	850	890	890	930	930	970
4. % ATTENDEES RPTING SATISFACTION W/ TRNG EVENTS	96	96	96	96	96	96	96	96
5. # SA TX PROGS THAT OBTAIN/MAINTAIN ACCREDITATION	20	20	21	21	22	22	23	23
PROGRAM TARGET GROUPS								
1. INDIVIDUALS IN NEED OF SA TREATMENT SVCS	93294	93294	93294	93294	93294	93294	93294	93294
2. INDIVIDUALS IN NEED OF SA PREVENTION SVCS	286459	286459	286459	286459	286459	286459	286459	286459
3. INDIVIDUALS WHO ARE SEEKING SA CERTIFICATION	553	400	400	420	420	440	440	440
4. # SA DIRECT SVC STAFF THAT CAN BENEFIT FR SA TRNGS	1400	1400	1400	1470	1470	1540	1540	1610
5. # OF SA TX PROGS THAT REQUIRE ACCREDITATION	20	20	21	21	22	22	23	23
PROGRAM ACTIVITIES								
1. # OF INDIVIDUALS RECEIVING TX SVCS	5655	5450	5450	5450	5450	5450	5450	5450
2. # OF INDIVIDUALS RECEIVE CURRICULUM-BASE PREV SVCS	18433	1300	1300	1300	1300	1300	1300	1300
3. # PROVIDED INFO RE STATUS OF SA CERT/RECERT APP	455	460	460	475	475	490	490	505
4. # SA CERT PROFS-OTHER SA STAFF ENROLLED IN TRNG	1344	1400	1400	1470	1470	1540	1540	1610
5. # OF SA TX PROGS REVIEWED FOR ACCREDITATION	20	20	21	21	22	22	23	23
PROGRAM REVENUES BY TYPE (IN THOUSANDS of DOLLARS)								
REVENUE FROM OTHER AGENCIES: FEDERAL	10,429	11,381	8,164	8,164	8,163	8,163	8,163	8,163
FINES, FORFEITS AND PENALTIES	500	500	500	500	500	500	500	500
TOTAL PROGRAM REVENUES	10,929	11,881	8,664	8,664	8,663	8,663	8,663	8,663
PROGRAM REVENUES BY FUND (IN THOUSANDS of DOLLARS)								
SPECIAL FUNDS	10,929	11,881	8,664	8,664	8,663	8,663	8,663	8,663
TOTAL PROGRAM REVENUES	10,929	11,881	8,664	8,664	8,663	8,663	8,663	8,663

NOTE: PROGRAM REVENUES BY TYPE AND FUND MAY NOT BE ACCURATE DUE TO SYSTEM ERROR.

A. Statement of Program Objectives

To provide the leadership necessary for the development and delivery of a culturally appropriate, comprehensive system of quality substance abuse prevention and treatment services designed to meet the needs of individuals and families.

B. Description of Request and Compliance with Section 37-68(1)(A)(B)

1. Housekeeping adjustment to federal fund ceiling to conform with Form FF process in FB 2015-17. (0.00/\$381,805 in federal funds (N); 0.00/\$381,805N).
2. Establish 1.00 temporary FTE positions and establish a ceiling for the Hawaii Pathways Project. (0.00/\$711,818 in other federal funds (P); 0.00/\$711,818P).
3. Housekeeping adjustment to delete 3.00 temporary full-time equivalent (FTE) positions and funds for the Strategic Prevention Framework – State Incentive Grant. (0.00/- \$146,677N; 0.00/- \$146,677N).
4. Establish 2.00 temporary FTE positions and establish a ceiling for the federally funded Strategic Prevention Framework – Partnerships for Success (SPF-PFS) grant award. (0.00/\$1,776,772P; 0.00/\$1,776,772P)

C. Description of Activities Performed

The Alcohol and Drug Abuse Division (ADAD) plans, coordinates and implements statewide plans, policies and services relative to alcohol and drug abuse; certifies substance abuse counselors and program administrators; accredits substance abuse programs; and provides for education, prevention, diagnostic, treatment and consultative services.

D. Statement of Key Policies Pursued

1. Improve service capacity (accessibility and availability) to address substance abuse prevention and treatment needs statewide.
2. Ensure and oversee the provision of effective, efficient and comprehensive substance abuse services throughout the State.
3. Continue to improve data systems to ensure accurate collection and analysis of program and contract data to better assess measures of effectiveness and other service outcomes.
4. Leverage additional resources to support substance abuse prevention and treatment services statewide.
5. Expand substance abuse counselor certification efforts to meet the evolving workforce development needs of the state.
6. Sponsor evaluation, needs assessment and research efforts to maintain a current understanding of community needs and problems.
7. Develop agreements with public and private sector agencies to improve the coordination and efficient use of limited resources to support needed services.

E. Identification of Important Program Relationships

1. Other State agencies—Departments of Human Services, Education, Public Safety and Attorney General; State Procurement Office; and the University of Hawaii system.
2. County agencies—Hawaii, Kauai, Maui and City and County of Honolulu.
3. Private nonprofit health and social service agencies that provide substance abuse prevention and treatment services.
4. Federal agencies—U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Substance Abuse Prevention (CSAP) and Center for Substance Abuse Treatment (CSAT), and Food and Drug Administration (FDA).

F. Description of Major External Trends Affecting the Program

Major trends affecting the program include: State and county initiatives to address homelessness that involve strengthening of infrastructure and service systems to address homeless individuals; and federal and state laws - Mental Health Parity and Addiction Equity Act and Act 186 Session Laws of Hawaii 2014 -- requiring insurance groups that cover mental health or substance use disorders to provide the same level of benefits as provided for general medical treatment.

G. Discussion of Cost, Effectiveness, and Program Size Data

Adolescent and adult substance abuse treatment programs achieved significant results during FY 2014. Outcomes for the sample of 1,019 adolescents at six months post discharge are as follows: 97.8% were employed, or enrolled in school or vocational training; 92.6% had no arrests since discharge; 60.6% had no substance use in 30 days prior to follow-up; 84.6% had no new substance abuse treatment; 96.0% had no hospitalizations; 93.5% had no emergency room visits; 85.3% had no psychological distress since discharge; and 97.8% were in stable living arrangements. Outcomes for the sample of 949 adults at six months post discharge are as follows: 55.2% were employed, or enrolled in school or vocational training; 81.2% had no arrests since discharge; 70.2% had no substance use in 30 days prior to follow-up; 68.8% had no new substance abuse treatment; 90.4% had no hospitalizations; 82.5% had no emergency room visits; 46.4% participated in self-help group (NA, AA, etc.) activities; 75.2% had no psychological distress since discharge; and 79.3% were in stable living arrangements.

Assessments continue to document higher service levels needed in comparison to current funding levels. The "2004 Hawaii Adult Household Survey" findings indicate that over 85,000 adults in Hawaii are in need of

treatment. In 2014, ADAD funded treatment for 3,108 adults. The "Hawaii Student Alcohol, Tobacco, and Other Drug Use Study: 2007-2008 Comprehensive Report" findings indicate that the percentages of students meeting criteria for substance use disorders by grade are as follows: 1.6% of 6th graders, 4.8% of 8th graders, 10.5% of 10th graders, and 17.8% of 12th graders.

H. Discussion of Program Revenues

The Drug Demand Reduction Assessments Special Fund provides substance abuse treatment services (at \$300,000) to offenders who are referred by the Department of Public Safety and supports a consortium (at \$200,000) of agencies and coalitions engaged in capacity enhancement for a statewide substance abuse prevention system. Federal Substance Abuse Prevention and Treatment (SAPT) Block Grant funds cover Division staffing and operating costs that include contracted substance abuse prevention and treatment services. Other federal funds for discretionary federal grants and contracts are: \$2,411,497 for the Hawaii Pathways Project funded by SAMHSA/CSAT/Cooperative Agreements to Benefit Homeless Individuals; \$1,776,772 for the SPF – PFS Grant funded by SAMHSA/CSAP; and \$255,710 for the FDA tobacco enforcement inspections to ensure compliance with the Tobacco Control Act (Public Law 111-31). (No cost extension for the SAMHSA/CSAT Access to Recovery project ends on January 31, 2015.)

I. Summary of Analysis Performed

None.

J. Further Considerations

45 C.F.R. 96.134 requires that the State maintain aggregate General Fund expenditures at a level that is not less than the average level of such expenditures for the two-year period preceding the year for which the State is applying for the SAPT Block Grant.

OPERATING AND CAPITAL APPROPRIATIONS

REPORT P61-A

PROGRAM ID: **HTH460**
 PROGRAM STRUCTURE NO. **050304**
 PROGRAM TITLE: **CHILD & ADOLESCENT MENTAL HEALTH**

PROGRAM EXPENDITURES	-----IN DOLLARS-----				-----IN THOUSANDS-----			
	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19	FY2019-20	FY2020-21
OPERATING COST	178.00*	177.00*	177.00*	177.00*	177.0*	177.0*	177.0*	177.0*
PERSONAL SERVICES	13,071,749	13,754,939	14,925,065	15,409,293	15,410	15,410	15,410	15,410
OTHER CURRENT EXPENSES	48,605,174	47,850,835	47,432,271	47,432,271	47,432	47,432	47,432	47,432
TOTAL OPERATING COST	61,676,923	61,605,774	62,357,336	62,841,564	62,842	62,842	62,842	62,842
BY MEANS OF FINANCING								
GENERAL FUND	161.00*	160.00*	160.00*	160.00*	160.0*	160.0*	160.0*	160.0*
	40,038,386	40,038,386	41,023,091	41,402,642	41,403	41,403	41,403	41,403
SPECIAL FUND	17.00*	17.00*	17.00*	17.00*	17.0*	17.0*	17.0*	17.0*
	14,985,824	14,985,824	15,043,973	15,070,731	15,071	15,071	15,071	15,071
FEDERAL FUNDS	*	*	*	*	*	*	*	*
	2,387,825	1,387,825	1,086,262	1,157,348	1,157	1,157	1,157	1,157
OTHER FEDERAL FUNDS	*	*	*	*	*	*	*	*
	2,000,000	2,928,851	2,928,851	2,928,851	2,929	2,929	2,929	2,929
INTERDEPT. TRANSFER	*	*	*	*	*	*	*	*
	2,264,888	2,264,888	2,275,159	2,281,992	2,282	2,282	2,282	2,282
TOTAL POSITIONS	178.00*	177.00*	177.00*	177.00*	177.00*	177.00*	177.00*	177.00*
TOTAL PROGRAM COST	61,676,923	61,605,774	62,357,336	62,841,564	62,842	62,842	62,842	62,842

PROGRAM ID: HTH460
 PROGRAM STRUCTURE: 050304
 PROGRAM TITLE: CHILD AND ADOLESCENT MENTAL HEALTH

	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21
MEASURES OF EFFECTIVENESS								
1. PERCENT OF YOUTHS ADMITTED TO RESIDENTIAL PROGRAMS	10	15	15	15	15	15	15	15
2. AVE LENGTH STAY (DAYS) CHDRN/YOUTH IN RESDNTL PRGM	105	110	110	110	110	110	110	110
3. % REGIS YOUTHS SHOWNG IMPRVMT BY CAFAS OR CBCL	61	67	67	67	67	67	67	67
4. % OF DIRECT SVC EXP FOR WHICH FED REIMB WERE RECVD	24	25	25	25	25	25	25	25
5. PERCENT OF YOUTH UNSERVED FOR MORE THAN 30 DAYS	0	0	0	0	0	0	0	0
6. % YOUTHS W/SVC MISMATCHES FOR MORE THAN 30 DAYS	.78	1	1	1	1	1	1	1
7. PERCENT OF PURCHASE-OF-SERVICE PROGRAMS MONITORED	100	100	100	100	100	100	100	100
8. % YOUTH RECEIVING EVIDENCE BASED SERVICES	20	25	25	25	25	25	25	25
9. # OF HOURS DEVOTED TO TRAIN/DEV OF STAFF/PROVIDERS	474	450	450	450	450	450	450	450
PROGRAM TARGET GROUPS								
1. # CHRN/YOUTH IDENTIF UNDER IND W/DISAB ACT	1850	1800	1800	1800	1800	1800	1800	1800
2. # CHDRN IDENTIFIED BY CAMHD AS QUALIF FOR HI QUEST	1488	1500	1500	1500	1500	1500	1500	1500
3. NO. OF CHILDREN AND YOUTH IN RESIDENTIAL PROGRAMS	220	250	250	250	250	250	250	250
4. NUMBER OF PURCHASE-OF-SERVICE PROGRAMS	30	30	30	30	30	30	30	30
PROGRAM ACTIVITIES								
1. # CHDRN/YOUTH RECV SVCS IN HOSPITAL-BASED RES PROG	72	75	75	75	75	75	75	75
2. # CHRN/YOUTH RECV SVC NON-HOSPITAL-BASED RES PROG	148	175	175	175	175	175	175	175
3. # CHDRN/YOUTH RECVNG HOME & COMMUNITY BASED SVCS	2000	2000	2000	2000	2000	3000	3000	3000
4. TOTAL AMOUNT (IN 1000'S) BILLED FOR SVCS PROVIDED	32805	33000	33000	33000	33000	33000	33000	33000
5. # OF PURCHASE-OF-SERVICE PROGRAMS TO BE MONITORED	30	30	30	30	30	30	30	30
6. TOT # OF HRS CLINICAL TRNING BY CAMHD STAFF	247.5	200	200	200	200	200	200	200
7. TOT # OF HOURS CLINICAL TRNING SPONSORED BY CAMHD	253.5	175	175	175	175	175	175	175
PROGRAM REVENUES BY TYPE (IN THOUSANDS of DOLLARS)								
REVENUES FROM THE USE OF MONEY AND PROPERTY	5	6	6	6	6	6	6	6
REVENUE FROM OTHER AGENCIES: FEDERAL	4,665	4,477	3,474	2,529	2,529	2,529	2,529	2,529
CHARGES FOR CURRENT SERVICES	6,941	7,260	7,260	7,260	7,260	7,260	7,260	7,260
TOTAL PROGRAM REVENUES	11,611	11,743	10,740	9,795	9,795	9,795	9,795	9,795
PROGRAM REVENUES BY FUND (IN THOUSANDS of DOLLARS)								
SPECIAL FUNDS	10,611	10,743	10,740	9,795	9,795	9,795	9,795	9,795
ALL OTHER FUNDS	1,000	1,000						
TOTAL PROGRAM REVENUES	11,611	11,743	10,740	9,795	9,795	9,795	9,795	9,795

NOTE: PROGRAM REVENUES BY TYPE AND FUND MAY NOT BE ACCURATE DUE TO SYSTEM ERROR.

A. Statement of Program Objectives

To improve the emotional well-being of children and adolescents and to preserve and strengthen their families by assuring easy access to a child and adolescent-focused, family-centered community-based coordinated system of care that addresses the physical, social, emotional and other developmental needs within the least restrictive natural environment. To ensure that the child and adolescent mental health system provides timely and accessible mental health services, with a commitment to continuous monitoring and evaluation for effectiveness and efficiency.

B. Description of Request and Compliance with Section 37-68(1)(A)(B)

1. Transfer positions/funding to allow for the implementation of the Child and Adolescent Mental Health Division (CAMHD) reorganization acknowledged on October 10, 2014 (0.00/\$0 in general funds (A); 0.00/\$0 A), (0.00/\$0 in special funds (B); 0.00/\$0 B).
2. Housekeeping item to reduce grant budget per grant award (0.00/-418,564 in federal funds (N); 0.00/-418,564 N).

C. Description of Activities Performed

In September 2009, CAMHD received a grant (Project Kealahou) from the Department of Health and Human Services (DHHS) Substance Abuse and Mental Health Services Administration (SAMHSA) to provide mental health services to adolescent girls with trauma histories. Various system-wide trainings have been provided to CAMHD employees, as well as CAMHD contracted providers. These trainings include the provision of trauma focused cognitive behavioral therapy, trauma informed care, gender specific programming and other evidence based interventions.

These services will continue upon completion of the grant through the trainings that have been provided.

In September, 2013, CAMHD received a grant (Project Lailima) from the DHHS SAMHSA to implement programs for the youth that have dual diagnoses of mental health and developmental disabilities. Through the work of Project Lailima CAMHD has recently contracted a new service for intensive in home specific to this population which will begin in January, 2015. Project Lailima has also been working in the community to provide system of care trainings and recognition of the needs of this specific population.

CAMHD continues to provide mental health services to the youth that are involved with the Juvenile Justice system through the Family Court Liaison Branch (FCLB) located on the grounds of the Hawaii Youth Correctional Facility. FCLB provides direct services to all youth incarcerated at the facility and at the Detention Home in Kapolei.

CAMHD continues to work with the Department of Education (DOE) youth determined eligible as Individuals with Disabilities Education Act. All youth are provided the array of contracted services of CAMHD, as well as intensive case management thru CAMHD's Family Guidance Center network.

D. Statement of Key Policies Pursued

CAMHD aims to increase its penetration by expanding its reach via collaborations with Primary Care at the Federally Qualified Health Centers (FQHC), an MOA with the Office of Youth Services (OYS) to provide services for youth who would otherwise be ineligible, to establish an interagency agreement through an MOU with the DOE particularly around out-of-home placement of youth, to expand Medicaid reimbursement through a new MOA with the Department of Human Services (DHS) MedQuest Division (MQD), to increase clinical efficiency and maintain compliance with National Healthcare

standards through further development of CAMHD's electronic health record and to expedite the enrollment of youth through increased collaboration with the Judges and Probation at the Judiciary. Additionally, there has been an effort to strengthen community resources by the provision of training and consultation.

E. Identification of Important Program Relationships

CAMHD continues to have strong relationships with other agencies involved in the mental health treatment of the youth in the State of Hawaii. CAMHD works very closely with DOE, DHS, Hawaii State Judiciary, DOH and the Hawaii Primary Care Association. These relationships have improved the continuum of care to the youth and adolescents throughout the state, as well as brought a new awareness of trends within the populations served.

F. Description of Major External Trends Affecting the Program

There is an increased awareness of suicide and bullying, which has required additional training and supports to staff and other State agencies to recognize signs and preventative interventions. Homelessness in Hawaii is on the increase. CAMHD has contracts with providers to provide outreach for mental health services to this population. There is an increased awareness of the need for services for multi-system youth that are involved in the criminal justice system and/or in the child welfare system with mental health needs. This has promoted increased collaboration for Wraparound, Safety, Permanency and Wellness (SPAW) services, in addition to increased collaborations with the Juvenile Justice system for youth affected by sex trafficking, runaways, drug addiction and abuse, and truancy. There continues to be a gap for youth that are dually diagnosed with mental health issues and developmental disabilities. CAMHD continues to work with the Developmental Disabilities Division and DOE to address these gaps.

G. Discussion of Cost, Effectiveness, and Program Size Data

CAMHD has continued to see cuts to the General Fund budget. While CAMHD has been able to maintain a system of care, the budget cuts have been very hard on the contracted providers and CAMHD has had a loss of some services due to the funding issues. Even though CAMHD is receiving less funds and serving a larger population, CAMHD anticipates no change in services. Between FY11 and FY14, CAMHD active youth has increased by 101%, from 1,117 youth served in FY11 to 2,249 youths in FY14. There is a large population of youth needing mental health services in the state that are not currently receiving services. This upward trend will continue, through continued collaboration with sister agencies.

H. Discussion of Program Revenues

CAMHD continues to work with the DHS MQD for the youth eligible for MedQUEST and Hawaii Medicaid. CAMHD receives reimbursement for services provided to these youth. CAMHD and MQD have developed a stronger MOA which will increase these revenues to CAMHD. CAMHD also receives reimbursement from DHS OYS. These youth are provided services through the CAMHD contracted providers with 100% reimbursement from OYS.

I. Summary of Analysis Performed

CAMHD has a very strong Research and Evaluation Team that continually reviews the data on the youth that CAMHD serves. CAMHD uses this data to develop the system of care, as well as determine the effectiveness of the existing programs. An annual report is written that provides the outcome data and trends for the services.

J. Further Considerations

With the implementation of the Electronic Health Record for all CAMHD clients, case management and direct services will be more closely monitored. There is a growing need for additional resources to continue providing services that meet the Affordable Care Act. CAMHD continues to meet all Federal and State requirements regarding patient care and documentation, but with continuing reductions in resources, CAMHD is operating below required minimums.

OPERATING AND CAPITAL APPROPRIATIONS

REPORT P61-A

PROGRAM ID: **HTH501**
 PROGRAM STRUCTURE NO. **050305**
 PROGRAM TITLE: **DEVELOPMENTAL DISABILITIES**

PROGRAM EXPENDITURES	-IN DOLLARS-				-IN THOUSANDS-			
	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19	FY2019-20	FY2020-21
OPERATING COST	206.75*	206.75*	206.75*	206.75*	206.8*	206.8*	206.8*	206.8*
PERSONAL SERVICES	11,031,988	11,031,988	12,129,256	12,469,398	12,468	12,468	12,468	12,468
OTHER CURRENT EXPENSES	61,621,638	62,084,526	62,084,526	62,084,526	62,086	62,086	62,086	62,086
TOTAL OPERATING COST	72,653,626	73,116,514	74,213,782	74,553,924	74,554	74,554	74,554	74,554
BY MEANS OF FINANCING								
GENERAL FUND	203.75*	203.75*	203.75*	203.75*	203.8*	203.8*	203.8*	203.8*
GENERAL FUND	71,614,634	72,077,522	73,174,790	73,514,932	73,515	73,515	73,515	73,515
SPECIAL FUND	3.00*	3.00*	3.00*	3.00*	3.0*	3.0*	3.0*	3.0*
SPECIAL FUND	1,038,992	1,038,992	1,038,992	1,038,992	1,039	1,039	1,039	1,039
TOTAL POSITIONS	206.75*	206.75*	206.75*	206.75*	206.80*	206.80*	206.80*	206.80*
TOTAL PROGRAM COST	72,653,626	73,116,514	74,213,782	74,553,924	74,554	74,554	74,554	74,554

PROGRAM ID: HTH501
PROGRAM STRUCTURE: 050305
PROGRAM TITLE: DEVELOPMENTAL DISABILITIES

	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21
MEASURES OF EFFECTIVENESS								
1. % OF PERSONS RECEIVING DEVLPMNTL DISABILITIES SVCS	13	13	13	13	13	13	13	13
2. NO. PERSONS W/DD REMAING IN INSTIT (SMALL ICF/ID)	80	80	80	80	80	80	80	80
3. NO. ADULTS CHOOSING THEIR OWN LIVING ARRANGEMENTS	2400	2400	2400	2400	2400	2400	2400	2400
4. NO. OF PERSONS WITH DEV DISAB IN PAID EMPLOYMENT	185	185	185	185	185	185	185	185
5. % PERSONS IN HSH RECEIVING DENTADENTAL TREATMENTS	95	95	95	95	95	95	95	95
6. % PERCENT PERSONS WHO COMPLETE DENTAL TREATMENT	55	55	55	55	55	55	55	55
PROGRAM TARGET GROUPS								
1. NUMBER OF PERSONS IN NEED OF DD SERVICES	3250	3250	3250	3250	3250	3250	3250	3250
2. NUMBER OF PEOPLE IN NEED OF NEUROTRAUMA SERVICES	575	575	575	575	575	575	575	575
PROGRAM ACTIVITIES								
1. NO. OF UNDUPLICATED INDIV RECVG COMMUNITY SUPPORTS	3250	3250	3250	3250	3250	3250	3250	3250
2. NUMBER OF PERSONS APPLYING FOR DD/ID ELIGIBILITY	281	281	281	281	281	281	281	281
3. NO. OF PERSONS RECEIVING HCBS-DD/ID WAIVER	2690	2690	2690	2690	2690	2690	2690	2690
4. NO. RESIDENTIAL CAREGIVERS CERTIFIED/RECERTIFIED	425	425	425	425	425	425	425	425
5. NUMBER OF ADULTS LIVING IN THEIR OWN HOME	110	110	110	110	110	110	110	110
6. NO. OF PERSONS W/DEV DISABILITIES EARNING INCOME	185	185	185	185	185	185	185	185
7. # ADVRS EVNT REPTS RECVD RE AB/NEGL, INJUR, HTH CONC	850	850	850	850	850	850	850	850
8. NO. OF PERSONS RECEIVING CASE MANAGEMENT SERVICES	3250	3250	3250	3250	3250	3250	3250	3250
9. # PERSONS IN HSH RECEIVING DENTAL TREATMENT	248	248	248	248	248	248	248	248
10. #PERSONS RECEIVING DENTAL TREATMENT AT DOH CLINICS	1800	1800	1800	1800	1800	1800	1800	1800
PROGRAM REVENUES BY TYPE (IN THOUSANDS of DOLLARS)								
CHARGES FOR CURRENT SERVICES	1,046	1,114	1,114	1,114	1,114	1,114	1,114	1,114
TOTAL PROGRAM REVENUES	1,046	1,114	1,114	1,114	1,114	1,114	1,114	1,114
PROGRAM REVENUES BY FUND (IN THOUSANDS of DOLLARS)								
GENERAL FUNDS	244	264	264	264	264	264	264	264
SPECIAL FUNDS	802	850	850	850	850	850	850	850
TOTAL PROGRAM REVENUES	1,046	1,114	1,114	1,114	1,114	1,114	1,114	1,114

NOTE: PROGRAM REVENUES BY TYPE AND FUND MAY NOT BE ACCURATE DUE TO SYSTEM ERROR.

A. Statement of Program Objectives

To support individuals with developmental disabilities, and/or neurotrauma to live a healthy, meaningful, productive and safe life in the community; to improve and maintain the healthy lifestyle choices and assuring access to dental health services.

B. Description of Request and Compliance with Section 37-68 (1)(A)(B)

No status quo budget requests.

C. Description of Activities Performed

1. Planning and Acquisition of Community Support Services to Individuals with DD/ID

The program plans, develops, and implements community support services for the developmentally and intellectually disabled population (DD/ID) utilizing the State's Medicaid Agency for DD/ID Home & Community-Based Services. The program provides supports that reflect the concept of self-determination.

2. Monitoring and Quality Assurance of Community Support Services to Individuals with DD/ID

- o The Case Management Section monitors physical conditions, social and direct care activities periodically to assure satisfaction with place of residence and work.
- o The Contracts & Resource Development Section monitors agencies that provide support services to DD/ID individuals living within the community.
- o The Outcomes and Compliance Branch's primary activity is Quality Assurance.

3. Dental Services

- o Evaluates new methods for the prevention and control of dental diseases and considers implementation as part of public health programming;
- o Dental Care services are provided to patients residing in Hawai'i State institutions such as Hawaii State Hospital, Hale Mohalu, Kalaupapa Settlement, and to community-based patients at four O'ahu regional health centers. Provider of last resort for indigent, severely developmentally disabled, severely and persistently mentally ill, frail elderly, and the medically compromised such as HIV and hepatitis-positive persons with basic comprehensive dental services.

D. Statement of Key Policies Pursued

The program strives to provide fair, objective and cost effective community supports to the DD/ID population based on Chapter 333F, HRS. The program's critical issues impacting the DD/ID population are self-determination, access to health care, employment and community inclusion. The Dental Services program:

- 1) Strives to assure basic dental treatment to State institution-based patients and indigent, community-based severely disabled persons.
- 2) Conducts clinical and epidemiological investigations relating to the prevalence, cause, diagnosis, treatment and prevention of dental diseases.
- 3) Evaluates the impact of policies on access to care and delivery of dental services.

E. Identification of Important Program Relationships

The program collaborates with the DD Council and the Center for Disability Studies at the University of Hawaii and works with the Adult and Child & Adolescent Mental Health Divisions and the Department of Education to meet the needs of individuals with coexisting diagnoses to allow individuals to live in the least restrictive setting without injury to self and others. The program works closely with the Department of Human Services to implement services under the DD/ID Home & Community-based Waiver program.

The Dental Services program provides consultative and technical assistance various state departments, and community agencies.

F. Description of Major External Trends Affecting the Program

The program is affected by Federal trends that are impacting Medicaid on the national level. As Medicaid policies emphasize quality assurance (QA), the Developmental Disabilities Division will need to emphasize quality and effectiveness in its QA program.

The Dental Services program provides relief for persons with limited access to basic dental care. Accessible basic dental services are needed statewide for persons with DD/ID. Adults with developmental disabilities may need behavioral support and anesthesia for optimal dental care.

G. Discussion of Cost, Effectiveness, and Program Size Data

- o The program's budget increases in order to assure timely admission of eligible DD/ID individuals to meet legal mandated requirements. The management of this growth and the evaluation of existing services have placed growing demand on the program's operational budget.

- o The federal Center for Medicare/Medicaid Services (CMS) now requires Medicaid funded programs to implement robust quality assurance programs.
- o The Dental Services Branch provides leadership to promote oral health statewide. The branch's staff is comprised of 6 dentists, and 5 dental assistants in 4 community-based and 1 institution-based dental clinics.

H. Discussion of Program Revenue

- o The program receives Medicaid reimbursements for targeted case management services.
- o The Neurotrauma special fund is supported by traffic violation fines and is used to support educational and informational activities.
- o Dental Services program revenues include collection of fees from Medicaid, and cash payments for dental treatment from clients.

I. Summary of Analysis Performed

Not Applicable.

J. Further Considerations

None.

OPERATING AND CAPITAL APPROPRIATIONS

REPORT P61-A

PROGRAM ID: **HTH495**
 PROGRAM STRUCTURE NO. **050306**
 PROGRAM TITLE: **BEHAVIORAL HEALTH ADMINISTRATION**

PROGRAM EXPENDITURES	-----IN DOLLARS-----				-----IN THOUSANDS-----			
	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19	FY2019-20	FY2020-21
OPERATING COST	57.50*	53.50*	46.50*	46.50*	46.5*	46.5*	46.5*	46.5*
PERSONAL SERVICES	5,404,479	5,151,807	5,237,278	5,190,655	5,191	5,191	5,191	5,191
OTHER CURRENT EXPENSES	2,592,907	2,148,703	2,251,602	1,722,389	1,722	1,722	1,722	1,722
TOTAL OPERATING COST	7,997,386	7,300,510	7,488,880	6,913,044	6,913	6,913	6,913	6,913
BY MEANS OF FINANCING								
GENERAL FUND	57.50*	53.50*	46.50*	46.50*	46.5*	46.5*	46.5*	46.5*
	6,760,523	6,568,683	6,619,690	6,775,681	6,776	6,776	6,776	6,776
OTHER FEDERAL FUNDS	*	*	*	*	*	*	*	*
	1,236,863	731,827	869,190	137,363	137	137	137	137
TOTAL POSITIONS	57.50*	53.50*	46.50*	46.50*	46.50*	46.50*	46.50*	46.50*
TOTAL PROGRAM COST	7,997,386	7,300,510	7,488,880	6,913,044	6,913	6,913	6,913	6,913

PROGRAM ID: HTH495
 PROGRAM STRUCTURE: 050306
 PROGRAM TITLE: BEHAVIORAL HEALTH ADMINISTRATION

	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21
MEASURES OF EFFECTIVENESS								
1. % PURCHASE-OF-SERVICE PROGRAMS MONITORED	100	100	100	100	100	100	100	100
2. % OF GRANTS APPLIED FOR AND OBTAINED	50	50	50	50	50	50	50	50
PROGRAM TARGET GROUPS								
1. RESIDENT POPULATION	1404000	1418000	1432100	1446400	1460800	1475400	1490100	1505000
2. # PURCHASE-OF-SERVICE PROVIDERS	67	69	70	70	71	71	72	72
PROGRAM ACTIVITIES								
1. # PURCHASE-OF-SERVICE PROGRAMS TO BE MONITORED	67	69	70	70	71	71	72	72
2. # OF GRANT APPLICATIONS SUBMITTED	2	2	2	2	2	2	2	2
PROGRAM REVENUES BY TYPE (IN THOUSANDS of DOLLARS)								
REVENUE FROM OTHER AGENCIES: FEDERAL	732	731						
TOTAL PROGRAM REVENUES	732	731						
PROGRAM REVENUES BY FUND (IN THOUSANDS of DOLLARS)								
ALL OTHER FUNDS	732	731						
TOTAL PROGRAM REVENUES	732	731						

NOTE: PROGRAM REVENUES BY TYPE AND FUND MAY NOT BE ACCURATE DUE TO SYSTEM ERROR.

A. Statement of Program Objective

To enhance program effectiveness and efficiency by formulating policies; directing operations and personnel; and providing other administrative services in the areas of Adult Mental Health inpatient and outpatient services and the other divisions of the Behavioral Health Administration.

B. Description of Request and Compliance with Section 37-68(A)(B)

1. Establish other federal grant ceiling and 1.00 temporary full-time equivalent (FTE) for the Behavioral Health Services Information System grant (0.00/\$137,363 in other federal funds (P); 0.00/\$137,363 P).
2. Reduce 2.50 temporary FTE and funds due to the completion of the Mental Transformation Grant: Implementing a Trauma-Informed System of Care grant (0.00/\$0 P; 0.00/- \$731,827 P).
3. Transfer out position/funding to HTH 420 to implement reorganization acknowledged February 2014 (0.00/\$0 in general funds (A); 0.00/\$0 A), (0.00/\$0 in special funds (B); 0.00/\$0 B).
4. Transfer out position/funding to HTH 907 to implement reorganization anticipated to be acknowledged December 2014 (-1.00/- \$59,303 A; -1.00/- \$59,303 A).

C. Description of Activities Performed

Major activities carried out in this program focus on the formulation and implementation of policies; planning; identification of needs; programming, allocation and distribution of resources; overall management of programs and facilities; administration of the approved expenditure plan, budgeting, standards, quality assurance, monitoring, information systems, training, and staff development in job-

related skills; and the provision of consultation, technical assistance and logistical support on a statewide basis.

Other major activities to be performed are review of Behavioral Health Administration activities to identify areas where standardization and consolidation would provide greater efficiency, identification of opportunities to enhance revenue generation, generation of cost-benefit management tools, and standardization of reports and quality outcome measures.

D. Statement of Key Policies Pursued

1. The expansion and enhancement of non-institutional alternatives to institutional care considering both treatment and domiciliary needs of consumers.
2. Maintenance of input from residents, consumers, and other public and private human services providers with an emphasis on the community as the primary focus of treatment to improve efforts in meeting community needs and the service delivery system.
3. Facilitation of contractual agreements with other public and private sectors to maximize the utilization of existing resources.
4. Reduce the criminalization of persons with severe and persistent mental illness (SPMI) by supporting mental health courts and by providing jail diversion programs statewide.

E. Identification of Important Program Relationships

1. State Agencies: (a) Department of Human Services relative to Medicaid and QUEST coverage of psychiatric services, social services entitlement, financial assistance, and vocational rehabilitation services, and (b) Department of Public Safety relative to the care of adults with SPMI while they are being adjudicated.
2. General Hospitals licensed as psychiatric facilities concerned with licensure and monitoring of standards.

F. Description of Major External Trends Affecting the Program

1. Fiscal constraints at the Federal and State levels.
2. The cost effectiveness of programs and services.
3. The availability of technical, professional and paraprofessional manpower.
4. The Federal government's ongoing influence in shaping the direction, priorities, and policy of public programs including Community Mental Health Services Block Grant requirements.
5. Natural disasters and severe economic and social conditions create emotional stress on families and individuals resulting in an increased demand for mental health services.

G. Discussion of Cost, Effectiveness, and Program Size Data

The Adult Mental Health Division will have increased responsibilities during the coming biennium due to increased efforts to reduce the census at Hawaii State Hospital by reconfiguring community-based service alternatives.

H. Discussion of Program Revenue

Revenues will continue to be collected primarily from Medicaid and Medicare.

I. Summary of Analysis Performed

None.

J. Further Considerations

There is a need to maintain consumers in the community by enhancing and reconfiguring community-based behavioral health services. The cost of appropriate residential and other community-based services is considerably less than the cost of hospitalization.

OPERATING AND CAPITAL APPROPRIATIONS

REPORT P61-A.

PROGRAM ID: **HTH610**
 PROGRAM STRUCTURE NO. **050401**
 PROGRAM TITLE: **ENVIRONMENTAL HEALTH SERVICES**

PROGRAM EXPENDITURES	IN DOLLARS				IN THOUSANDS			
	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19	FY2019-20	FY2020-21
OPERATING COST	125.00*	128.00*	128.00*	128.00*	128.0*	128.0*	128.0*	128.0*
PERSONAL SERVICES	6,452,248	6,918,262	7,772,572	8,031,591	8,031	8,031	8,031	8,031
OTHER CURRENT EXPENSES	1,205,667	1,117,901	1,016,458	1,016,458	1,016	1,016	1,016	1,016
EQUIPMENT	230,700	223,700	223,700	223,700	224	224	224	224
TOTAL OPERATING COST	7,888,615	8,259,863	9,012,730	9,271,749	9,271	9,271	9,271	9,271
BY MEANS OF FINANCING								
GENERAL FUND	100.00*	100.00*	100.00*	100.00*	100.0*	100.0*	100.0*	100.0*
	5,598,048	5,671,968	6,260,421	6,454,543	6,454	6,454	6,454	6,454
	18.00*	21.00*	21.00*	21.00*	21.0*	21.0*	21.0*	21.0*
SPECIAL FUND	1,640,404	1,897,437	1,970,172	1,996,457	1,996	1,996	1,996	1,996
	2.00*	2.00*	2.00*	2.00*	2.0*	2.0*	2.0*	2.0*
FEDERAL FUNDS	67,711	253,443	340,454	377,002	377	377	377	377
	4.00*	4.00*	4.00*	4.00*	4.0*	4.0*	4.0*	4.0*
OTHER FEDERAL FUNDS	526,971	381,534	381,534	381,534	382	382	382	382
	1.00*	1.00*	1.00*	1.00*	1.0*	1.0*	1.0*	1.0*
INTERDEPT. TRANSFER	55,481	55,481	60,149	62,213	62	62	62	62
TOTAL POSITIONS	125.00*	128.00*	128.00*	128.00*	128.00*	128.00*	128.00*	128.00*
TOTAL PROGRAM COST	7,888,615	8,259,863	9,012,730	9,271,749	9,271	9,271	9,271	9,271

PROGRAM ID: HTH610
 PROGRAM STRUCTURE: 050401
 PROGRAM TITLE: ENVIRONMENTAL HEALTH SERVICES

	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21
MEASURES OF EFFECTIVENESS								
1. % OF SCHOOLS IN COMPLIANCE WITH AHERA (IRH)	95	95	95	95	95	95	95	95
2. % FOOD ESTABLISHMENTS RECEIVING "PASS" PLACARD	NA	65	65	70	75	80	80	85
3. % FOOD ESTABMTS RCVG "CONDITIONAL PASS" PLACARD	NA	35	35	40	25	20	20	15
4. % FOOD ESTABLISHMENTS RECEIVING "CLOSED" PLACARD	NA	1	1	1	1	1	1	1
5. % FARMS W/ VIOLATIVE PESTICIDE RESIDUES	3	5	5	5	5	5	5	5
6. % FOOD ESTABMTS W/RISK FACTORS FOODBORNE ILLNESS	40	40	35	30	25	20	20	15
7. % AIR-CONDITION/VENTILATD FACILITIES IN COMPLIANC	NA	60	70	70	70	70	70	70
8. % NOISE PERMITS IN COMPLIANCE (IRH)	98	98	98	98	98	98	98	98
9. % RADIATION FACILITIES IN COMPLIANCE (IRH)	54	60	70	70	70	70	70	70
10. % ASBESTOS RENOV/DEMO (NESHAP) PROJS IN COMPLIANCE	NA	90	90	90	90	90	90	90
PROGRAM TARGET GROUPS								
1. # SCHLS REQUIRED TO IMPLMT ASBESTOS MGT PLAN (IRH)	447	440	440	440	440	440	440	440
2. # FOOD ESTABLISHMENTS	10095	10100	10100	10150	10200	10200	10250	10250
3. POPULATION OF HAWAII	1400000	1410000	1430000	1450000	1460000	1480000	1490000	1500000
4. # TEMPORARY FOOD ESTABLISHMENT PERMITTEES	6214	6200	6200	6200	6250	6250	6250	6300
5. # FARMS WITH VIOLATIVE PESTICIDE RESIDUES	2	2	2	2	2	2	2	2
6. # LICENSED RADIOLOGIC TECHNOLOGISTS (IRH)	1442	1500	1500	1500	1500	1500	1500	1500
7. # TATTOO SHOPS	136	136	136	136	136	140	140	140
8. # SITES WITH A NOISE PERMIT	583	600	600	600	600	600	600	600
9. # OF RADIATION FACILITIES (IRH)	1138	1120	1120	1120	1120	1120	1120	1120
10. # ASBESTOS RENOVATN/DEMOLITN (NESHAP) PROJS (IRH)	659	700	700	700	700	700	700	700
PROGRAM ACTIVITIES								
1. # INSPECTIONS OF AHERA SOURCES (IRH)	89	90	90	90	90	90	90	90
2. # ROUTINE INSPECTIONS OF FOOD ESTABLISHMENTS	5871	6300	7000	10000	12000	15000	18000	18000
3. # FOOD SAFETY INSPECTIONS W/ 2/MORE MAJOR VIOLATNS	1355	1300	1200	1100	1000	1000	1000	1000
4. # AS-BUILT AC/VENTILATION INSPECTIONS (IRH)	NA	50	80	120	150	150	150	150
5. # FOOD PRODUCTS SAMPLED FOR PESTICIDE RESIDUE	184	200	250	300	400	400	400	400
6. # FOODBORNE ILLNESS INVESTIGATIONS CONDUCTED	228	240	240	220	210	200	190	180
7. # RADIOLOGIC TECHS AUDITD FOR LICENSURE COMPLIANCE	NA	750	750	750	750	750	750	750
8. # NOISE PERMIT INSPECTIONS (IRH)	219	500	500	500	500	500	500	500
9. # INSPECTIONS OF RADIATION FACILITIES (IRH)	96	160	225	225	225	225	225	225
10. # FOOD SAFETY CLASSES CONDUCTED	123	120	150	150	150	150	150	150
PROGRAM REVENUES BY TYPE (IN THOUSANDS of DOLLARS)								
LICENSES, PERMITS, AND FEES	680	1,088	1,958	1,962	1,957	1,962	1,962	1,962
REVENUES FROM THE USE OF MONEY AND PROPERTY	6	6	6	6	6	6	6	6
REVENUE FROM OTHER AGENCIES: FEDERAL	374	362	362	362	362	362	362	362
CHARGES FOR CURRENT SERVICES	359	353	359	353	359	353	359	359
FINES, FORFEITS AND PENALTIES	7	7	7	7	7	7	7	7
NON-REVENUE RECEIPTS	55	55	55	55	55	55	55	55
TOTAL PROGRAM REVENUES	1,481	1,871	2,747	2,745	2,746	2,745	2,751	2,751
PROGRAM REVENUES BY FUND (IN THOUSANDS of DOLLARS)								
GENERAL FUNDS	5	5	5	5	5	5	5	5
SPECIAL FUNDS	1,070	1,472	2,348	2,346	2,347	2,346	2,352	2,352
ALL OTHER FUNDS	406	394	394	394	394	394	394	394
TOTAL PROGRAM REVENUES	1,481	1,871	2,747	2,745	2,746	2,745	2,751	2,751

NOTE: PROGRAM REVENUES BY TYPE AND FUND MAY NOT BE ACCURATE DUE TO SYSTEM ERROR.

A. Statement of Program Objectives

To protect the community from food-borne illnesses, unsanitary or hazardous conditions, adulterated or misbranded products, and vector-borne diseases; and to control noise, radiation, and indoor air quality.

B. Description of Request and Compliance with Section 37-68(1)(A)(B)

Adjust federal fund ceiling per Form FF estimates of federal grant award amounts for HTH 610/FR, Indoor and Radiological Health Branch (0.00/- \$101,443 in federal funds (N); 0.00/- \$101,443 N).

C. Description of Activities Performed

1. **Research and Standards:** Conduct research in the areas of biological control methods for vectors, new methods for assuring the safety and sanitation of public health issues and new and improved methods and equipment for sampling and inspection activities, and develop and maintain program standards and rules reflecting the results of the research. Conduct assessment, and develop policies and regulations to assure safety in the fields of noise, radiation, mechanical ventilation, indoor air quality, asbestos, and lead.
2. **Inspection:** Perform inspections of food service, food establishments, radiation sources, chronic vector breeding sources, public and private dwellings, mortuaries, cemeteries, radiation sources, sources of noise (construction, stationary, agricultural, and industrial), mechanical ventilation systems, indoor air quality, asbestos, lead, etc., to assure they do not degrade the public health or the environment of the community.
3. **Measurement and Surveillance:** Monitor the population trend of major vectors on a statewide basis; perform surveillance of food, nonprescription drugs, therapeutic devices, and cosmetics to assure that they are safe and/or effective and properly labeled; and collect and test

samples of shellfish and other marine life for compliance with standards of purity and quality. Monitor ambient environmental radiation levels by sampling and testing drinking water, air, and precipitation. During a radiological incident such as Fukushima, sampling and testing rates are increased to ensure public safety.

4. **Abatement:** Control the breeding areas through the application of chemicals or biological predators and follow up on inspection and surveillance items that may pose a threat to public health or the environment.
5. **Review:** Review plans for public buildings to assure conformance with sanitation and ventilation requirements.
6. **Public Participation:** Provide programs and information to the public and the regulated community to increase their awareness and understanding of the Environmental Health Services rules.
7. **Emergency Response** for radiological emergencies.

D. Statement of Key Policies Pursued

The program focuses on the highest risks to public health and prevention. It has been the practice to utilize a public information and educational approach to motivate the public and operators towards compliance with applicable standards and regulations. Within this context, technical consultations and advice are provided to public and private agencies or individuals regarding the correction of existing or potentially hazardous conditions and practices. These approaches are coupled with surveillance and enforcement programs for the optimum use of available resources.

E. Identification of Important Program Relationships

1. **Intradepartmental:** The State Laboratories Division of the Department of Health provides analyses of many of the samples collected by the

programs. The Disease Outbreak Control Division is a partner in dealing with vector and food-borne disease outbreaks.

2. Interagency: General guidelines are established by the U.S. Food and Drug Administration and the U.S. Public Health Service. From these guidelines the programs promulgate Administrative Rules. Close coordination is maintained with the Department of Agriculture in the areas of pesticides and the labeling of food, drug, and cosmetics. U.S. EPA provides grants and requirements related to lead, asbestos, and indoor air quality. Radiological regulation and disaster preparedness involve working with many county, state, and federal agencies, including the Hawaii Emergency Management Agency.

F. Description of Major External Trends Affecting the Program

Attention to environmental and public health issues in both Congress and federal agencies creates an ever-changing atmosphere for the program. Another major force affecting the program is the growing sophistication and awareness of the general public in recent, high profile cases of emerging pathogens, food-borne illnesses and other disease pathogens introduced to Hawaii, which results in a greater demand for the programs to maintain their capabilities for research and planning, vigilance and timely response when necessary. Terrorism has played a significant role in raising the level of focus for the environmental health programs, requiring the development of plans and capabilities to prevent and respond to acts of terrorism, including biological, chemical, and radiological.

G. Discussion of Cost, Effectiveness, and Program Size Data

Funding reductions and restrictions have resulted in a curtailment of certain services. The Program has prioritized all services and those with the greatest potential hazard to public health are given the highest priority.

H. Discussion of Program Revenues

Program revenues are generated from permit fees for food establishments, temporary food establishments, and swimming pools; fees for plan reviews; and fees for registration, examination, and/or licensing of embalmers, funeral establishments, tattoo artists, tattoo shops, and laboratory professionals. The receipts from these activities are deposited into the Sanitation and Environmental Health Special Fund.

Operating funds are also received from the State Department of Transportation to finance rodent control services at the Honolulu International Airport. Occasionally, federal funds are made available by the U.S. Food and Drug Administration and the U.S. Environmental Protection Agency for special studies.

Fees for noise permits and variances, licensing of radiation facilities and services, and licensing of radiologic technologists are deposited into the Noise, Radiation, and Indoor Air Quality Special Fund.

Fees for notification of renovation and demolition involving asbestos-containing materials, certification of asbestos and lead abatement entities/individuals, and registration/accreditation of laboratory facilities are deposited to the Asbestos and Lead Abatement Special Fund.

I. Summary of Analysis Performed

Not applicable.

J. Further Considerations

None.

OPERATING AND CAPITAL APPROPRIATIONS

REPORT P61-A

PROGRAM ID: **HTH710**
 PROGRAM STRUCTURE NO. **050402**
 PROGRAM TITLE: **STATE LABORATORY SERVICES**

PROGRAM EXPENDITURES	IN DOLLARS				IN THOUSANDS			
	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19	FY2019-20	FY2020-21
OPERATING COST	72.00*	72.00*	72.00*	72.00*	72.0*	72.0*	72.0*	72.0*
PERSONAL SERVICES	4,038,504	4,038,504	5,791,589	4,633,760	4,635	4,635	4,635	4,635
OTHER CURRENT EXPENSES	3,269,417	3,171,883	3,424,135	3,242,054	3,241	3,241	3,241	3,241
TOTAL OPERATING COST	7,307,921	7,210,387	9,215,724	7,875,814	7,876	7,876	7,876	7,876
BY MEANS OF FINANCING								
GENERAL FUND	72.00* 6,810,558	72.00* 6,810,558	72.00* 7,245,724	72.00* 7,405,814	72.0* 7,406	72.0* 7,406	72.0* 7,406	72.0* 7,406
FEDERAL FUNDS	* 11,129	* *	* *	* *	* *	* *	* *	* *
OTHER FEDERAL FUNDS	* 486,234	* 399,829	* 1,970,000	* 470,000	* 470	* 470	* 470	* 470
TOTAL POSITIONS	72.00*	72.00*	72.00*	72.00*	72.00*	72.00*	72.00*	72.00*
TOTAL PROGRAM COST	7,307,921	7,210,387	9,215,724	7,875,814	7,876	7,876	7,876	7,876

PROGRAM ID: HTH710
 PROGRAM STRUCTURE: 050402
 PROGRAM TITLE: STATE LABORATORY SERVICES

	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21
MEASURES OF EFFECTIVENESS								
1. % OF FALSE POSITIVE LAB TEST RESULTS	0	0	0	0	0	0	0	0
2. % OF FALSE NEGATIVE LAB TEST RESULTS	0	0	0	0	0	0	0	0
3. % OF REQUESTS FOR SERVICES MET	99	99	99	99	99	99	99	99
4. % PROFICIENCY TESTS PERFRMD MEETG PROFICIENCY STDS	99	100	100	100	100	100	100	100
PROGRAM TARGET GROUPS								
1. OTHER DEPARTMENT OF HEALTH PROGRAMS	9	9	9	9	9	9	9	9
2. OTHER GOVERNMENT AGENCIES	7	7	7	7	7	7	7	7
3. # OF CLINICAL LAB PERSONNEL APPLYING FOR LICENSURE	93	90	90	90	90	90	90	90
4. # OF LICENSED CLINICAL LABORATORY PERSONNEL	1450	1500	1500	1500	1500	1500	1500	1500
5. # OF LABS PERFORMING CLINICAL DIAGNOSTIC TESTING	764	800	800	800	800	800	800	800
6. # OF LABS PERFORMING SUBSTANCE ABUSE TESTING	2	2	2	2	2	2	2	2
7. # OF LABS PERFORMING ENVIRONMENTAL TESTING	19	19	19	19	19	19	19	19
PROGRAM ACTIVITIES								
1. DRINKING WATER (WORK TIME UNITS)	265000	411000	411000	411000	411000	411000	411000	411000
2. WATER POLLUTION (WORK TIME UNITS)	264497	245000	245000	245000	245000	245000	245000	245000
3. SEXUALLY TRANSMITTED DISEASE (WORK TIME UNITS)	194432	272000	272000	272000	272000	272000	272000	272000
4. TUBERCULOSIS (WORK TIME UNITS)	10000	2500	2500	2500	2500	2500	2500	2500
5. OTHER COMMUNICABLE DISEASES (WORK TIME UNITS)	313850	531000	531000	531000	531000	531000	531000	531000
6. FOOD AND DRUGS (WORK TIME UNITS)	226831	243000	243000	243000	243000	243000	243000	243000
7. AIR POLLUTION (WORK TIME UNITS)	654034	699000	699000	699000	699000	699000	699000	699000
8. # OF LABORATORY INSPECTIONS	15	15	15	15	15	15	15	15
9. # OF LAB PERSONNEL RECEIVING FORMAL LAB TRAINING	101	108	108	108	108	108	108	108
PROGRAM REVENUES BY TYPE (IN THOUSANDS of DOLLARS)								
LICENSES, PERMITS, AND FEES	3	3	3	3	3	3	3	3
REVENUE FROM OTHER AGENCIES: FEDERAL	368	374	374	374	374	374	374	374
CHARGES FOR CURRENT SERVICES	4	45	4	45	4	42	4	4
TOTAL PROGRAM REVENUES	375	422	381	422	381	419	381	381
PROGRAM REVENUES BY FUND (IN THOUSANDS of DOLLARS)								
SPECIAL FUNDS	375	422	381	422	381	419	381	381
TOTAL PROGRAM REVENUES	375	422	381	422	381	419	381	381

NOTE: PROGRAM REVENUES BY TYPE AND FUND MAY NOT BE ACCURATE DUE TO SYSTEM ERROR.

A. Statement of Program Objectives

To enhance the effectiveness of other health programs by providing specialized laboratory services to health care facilities and departmental programs and to various official agencies.

B. Description of Request and Compliance with Section 37-68(1)(A)(B)

Adjust federal fund ceiling per Form FF estimates of federal grant award amounts for HTH 710/MK, Central Services (0.00/\$1,570,171 in other federal funds (P); 0.00/\$70,171 P).

Tradeoff/Transfer to implement reorganization acknowledged July 16, 2014 (0.00/\$0 in general funds (A); 0.00/\$0 A).

C. Description of Activities Performed

1. Provide clinical and public health microbiological and serological analyses to state and federal programs, as well as community and regional entities. Includes, but not limited to conventional and molecular detection and characterization of viruses, bacteria, tuberculosis, and parasites.
2. Provide: Environmental analyses for chemical and microbiological contaminants; Microbiological and chemical analysis of food; Training for microbiologists, chemists, and laboratory assistants; Consultative services to the Environmental Health programs; Certification for laboratories that perform compliance work for the analyses of drinking water, shellfish, and milk; Licensing for clinical laboratory personnel; Administration of the statutory statewide program relating to chemical testing of blood alcohol concentrations for DUI cases.

3. Adopt, amend and enforce regulatory provisions of HAR relating to the licensing of clinical laboratory personnel; licensing of substance abuse laboratories and medical review officers; potable water testing laboratories; and DUI.

D. Statement of Key Policies Pursued

Within existing resources, the laboratory utilizes approved, validated, or verified materials and methods along with stringent quality assurance practices to ensure the accuracy and precision of laboratory test results. The Division adheres to accepted safety and security practices commensurate with professional activities and obligations.

E. Identification of Important Program Relationships

In addition to DOH programs, the program maintains professional relationships with the federal Environmental Protection Agency, the Centers for Disease Control and Prevention, the Food and Drug Administration, the Federal Bureau of Investigation, the U. S. Army and U.S. Navy, the Agency for Toxic Substances and Disease Registry, Association of Public Health Laboratories, Food and Drug Administration, U.S. Department of Agriculture, National Animal Health Laboratory Network, State public health laboratories, clinical and environmental laboratories located in Hawaii, the Water Resources and Research Committee, all county Police and Fire Departments and Prosecutor's Office and the state Departments of the Attorney General, Agriculture, Land and Natural Resources, and Transportation.

F. Description of Major External Trends Affecting the Program

Emerging diseases, (Ebola, Chikungunya, rat lungworm, etc.), persistent volcanic activity (vog monitoring), drug-resistant organisms (tuberculosis, influenza, etc.), terrorism threats (chemical and biological), and tainted food (Salmonella, E. coli, melamine, norovirus, etc.), have increased the visibility and demand for analytical testing. This program is impacted by federal law (i.e.-Clinical Laboratory Improvement Amendments, Drinking Water Act, the Clean Air Act, etc.) Changes in federal laws generally require phasing in new state regulatory requirements, which often drive the need for additional resources.

G. Discussion of Cost, Effectiveness, and Program Size Data

Operation of the state-of-the-art main laboratory facility in Pearl City is expensive. The facility is aging and the replacement of its components will need to be addressed in the not too distant future. The Department of Health ordered a study of the facility and the recommendations of that study are on file and will be provided upon request. There are neighbor island laboratories located in Hawaii, Maui, and Kauai.

H. Discussion of Program Revenues

The State Lab Division (SLD) uses external sources of funding such as federal grants, cooperative agreements, contracts, or reimbursement arrangements to meet testing obligations.

I. Summary of Analysis Performed

Annual testing for microbial contaminants/chemicals in 500,000 air samples, 4,000 recreational water samples, 300 food products, 300 shellfish-related samples, 4,000 drinking water samples, 40,000 human clinical specimens, 50 bird samples, and other animal testing for rabies, swine and avian influenza.

J. Further Considerations

The State Laboratories Division has an aging facility that will need to be addressed. Much of the facility's equipment is original and is well past its normal useful life. Also, the past elimination of important positions has caused considerable stress in covering the tasks, such as quality management, to the remaining members of the staff.

OPERATING AND CAPITAL APPROPRIATIONS

REPORT P61-A

PROGRAM ID: HTH720
 PROGRAM STRUCTURE NO. 050403
 PROGRAM TITLE: HEALTH CARE ASSURANCE

PROGRAM EXPENDITURES	IN DOLLARS				IN THOUSANDS			
	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19	FY2019-20	FY2020-21
OPERATING COST	37.00*	36.00*	36.00*	36.00*	36.0*	36.0*	36.0*	36.0*
PERSONAL SERVICES	2,474,465	2,691,180	2,816,081	2,832,983	2,833	2,833	2,833	2,833
OTHER CURRENT EXPENSES	1,049,261	2,183,550	1,630,542	1,630,542	1,630	1,630	1,630	1,630
TOTAL OPERATING COST	3,523,726	4,874,730	4,446,623	4,463,525	4,463	4,463	4,463	4,463
BY MEANS OF FINANCING								
GENERAL FUND	19.60*	21.60*	21.60*	21.60*	21.6*	21.6*	21.6*	21.6*
SPECIAL FUND	1,479,878	1,991,608	1,635,403	1,652,305	1,652	1,652	1,652	1,652
FEDERAL FUNDS	406,000	406,000	406,000	406,000	406	406	406	406
OTHER FEDERAL FUNDS	73,128	17.40*	14.40*	14.40*	14.4*	14.4*	14.4*	14.4*
TOTAL POSITIONS	17.40*	14.40*	14.40*	14.40*	14.4*	14.4*	14.4*	14.4*
TOTAL PROGRAM COST	1,564,720	2,477,122	2,405,220	2,405,220	2,405	2,405	2,405	2,405
TOTAL POSITIONS	37.00*	36.00*	36.00*	36.00*	36.00*	36.00*	36.00*	36.00*
TOTAL PROGRAM COST	3,523,726	4,874,730	4,446,623	4,463,525	4,463	4,463	4,463	4,463

PROGRAM ID: HTH720
 PROGRAM STRUCTURE: 050403
 PROGRAM TITLE: HEALTH CARE ASSURANCE

	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21
MEASURES OF EFFECTIVENESS								
1. % FACILITIES MTG MINIMUM LICENSURE/CERTIFICATN REQ	100	100	100	100	100	100	100	100
2. % OF UNLICENSED SETTINGS BROUGHT INTO COMPLIANCE	100	100	100	100	100	100	100	100
3. % COMPLAINTS INVESTGTD & CORRECTV ACTION COMPLETED	50	100	100	100	100	100	100	100
PROGRAM TARGET GROUPS								
1. HOSPITALS	28	28	28	28	28	28	28	28
2. NURSING HOMES (SKILLED AND INTERMEDIATE)	49	49	49	49	49	49	68	68
3. ADULT RESIDENTIAL/FOSTER/COMMUNITY HOMES/DAY CARE	506	506	1723	1723	1723	1723	1723	1723
4. END STAGE RENAL DIALYSIS UNITS	43	43	43	43	43	43	43	43
5. SPCL TREATMENT FACILITIES/THERAPEUTIC LIVING PROGS	18	18	18	18	18	18	18	18
6. CASE MGMT AGENCIES AND DIETICIANS	22	112	112	112	112	112	112	112
7. CLINICAL LABORATORIES	782	782	782	782	782	782	782	782
8. HOME HLTH AGENCIES/HOME CARE AGENCIES	39	39	39	39	39	39	39	39
9. AMBULATORY SURGICAL CENTERS	27	14	14	14	14	14	14	14
10. HOSPICES	13	13	13	13	13	13	13	13
PROGRAM ACTIVITIES								
1. NUMBER OF STATE LICENSING SURVEYS	1306	3089	3089	3089	3089	3089	3089	3089
2. NUMBER OF MEDICARE CERTIFICATION SURVEYS	311	1382	1382	1382	1382	1382	1382	1382
3. NUMBER OF STATE COMPLAINT INVESTIGATIONS	36	45	45	45	45	45	45	45
4. NUMBER OF FEDERAL COMPLAINT INVESTIGATIONS	140	140	140	140	140	140	140	140
5. NUMBER OF INVESTIGATIONS OF UNLICENSED ACTIVITIES	5	5	5	5	5	5	5	5
PROGRAM REVENUES BY TYPE (IN THOUSANDS of DOLLARS)								
REVENUE FROM OTHER AGENCIES: FEDERAL	1,564	2,563	1,941	1,852	1,852	1,852	1,852	1,852
CHARGES FOR CURRENT SERVICES	8	5	5	5	5	5	5	5
FINES, FORFEITS AND PENALTIES	1	1	1					
TOTAL PROGRAM REVENUES	1,573	2,569	1,947	1,857	1,857	1,857	1,857	1,857
PROGRAM REVENUES BY FUND (IN THOUSANDS of DOLLARS)								
SPECIAL FUNDS	9	6	6	5	5	5	5	5
ALL OTHER FUNDS	1,564	2,563	1,941	1,852	1,852	1,852	1,852	1,852
TOTAL PROGRAM REVENUES	1,573	2,569	1,947	1,857	1,857	1,857	1,857	1,857

NOTE: PROGRAM REVENUES BY TYPE AND FUND MAY NOT BE ACCURATE DUE TO SYSTEM ERROR.

A. Statement of Program Objectives

To establish and enforce minimum standards to assure the health, welfare, and safety of people in health care facilities and services.

for the purpose of determining compliance for participation in the Medicare (Title XVIII) and/or Medicaid (Title XIX) reimbursement programs; issues sanctions for non-compliance activities as appropriate; and responds and investigates all complaints relative to any of the above.

B. Description of Requests and Compliance with section 37-68(1)(A)(B)

The budget includes the following:

1. Adjustment to other federal fund (P) ceiling: The federal budget ceiling should be at \$2,088,725 when labor savings of \$73,128 is netted out, and when accounting for the anticipated federal awards. The current federal ceiling is \$2,477,122. An adjustment for the difference of -\$388,397 is being requested to align the federal budget with the grant awards. This adjustment includes item B.2. below (0.00/-388,397P; 0.00/-388,397P).
2. Establish ceiling for non-appropriated funds and subsequent increase in other federal funds by \$316,495 pursuant to Act 093, SLH 2012; accommodate federal funds from DHS/MQD to cover federal share of DHS/MQD contracts which transferred to DOH/OHCA (0.00/\$316,495P; 0.00/\$316,495P).

D. Statement of Key Policies Pursued

The major program policy to be continued is to establish, implement and enforce minimum standards to assure the health, welfare, quality of care and safety of people who seek health care in various licensed and certified care settings.

E. Identification of Important Program Relationships

Other programs which are related to this program:

1. Ongoing annual contract with CMS to implement the Federal survey and certification program in Hawaii to enable providers to participate in the Medicare reimbursement program.
2. Ongoing agreement with the State Department of Human Services (DHS) to do the Medicaid survey and certification program based on Federal requirements.
3. Cooperative working relationship with private and public providers, health care facility trade organizations in the community and various other State departments.
4. Cooperative working relationship with staff at the CMS Regional Office in San Francisco and the Central Office in Baltimore to satisfy the requirements of the 1864 Agreement and with CMS liaison staff in Honolulu.

C. Description of Activities Performed

The Office of Health Care Assurance (OHCA) promulgates, amends, updates and implements mandatory State licensing rules for health care facilities and agencies including community and residential care settings; conducts on-site inspections to determine compliance with state laws and regulations; is responsible for the implementation of the Centers for Medicare & Medicaid Services (CMS) contract (1864 Agreement) to conduct survey and certification activities based on Federal regulations

F. Description of Major External Trends Affecting the Program

Continued increase in demand for health care services especially for the elderly, frail and vulnerable populations which require the licensure of new residential care homes, nursing homes and other health care facilities or organizations.

The OHCA also assumed the responsibility from DHS of licensing or certifying the adult community care foster family homes, case management agencies, and adult day care programs beginning July 1, 2014, as part of the governor's New Day initiative to reshape state government.

G. Discussion of Cost, Effectiveness, and Program Size Data

None.

Discussion of Program Revenue

Non-general fund revenue is currently received from CMS under the 1864 Agreement in order to perform unannounced onsite Medicare and Medicaid certification survey inspections of qualified health care facilities or organizations in Hawaii. These non-general fund revenues through Title XVIII and Title XIX are expected to continue for the state FY16 and FY17.

The OHCA is preparing to implement new administrative rules which will adopt state licensing fees for the initial licensure, license renewal and other aspects of the licensing process of health care facilities or organizations. Implementation is expected to begin before the end of state FY15.

I. Summary of Analysis Performed

None.

J. Further Considerations

Staff resources will enable the OHCA to carry out more fully its required state and federal regulatory responsibilities in an efficient and timely manner and do so in a way that will comply with CMS contractual obligations.

OPERATING AND CAPITAL APPROPRIATIONS

REPORT P61-A

PROGRAM ID: **HTH906**
 PROGRAM STRUCTURE NO. **050501**
 PROGRAM TITLE: **STATE HEALTH PLANNING & DEVELOPMENT AGEN**

PROGRAM EXPENDITURES	--IN DOLLARS--				--IN THOUSANDS--			
	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19	FY2019-20	FY2020-21
OPERATING COST	6.00*	6.00*	6.00*	6.00*	6.0*	6.0*	6.0*	6.0*
PERSONAL SERVICES	452,151	452,151	499,622	517,488	518	518	518	518
OTHER CURRENT EXPENSES	146,278	146,278	146,278	146,278	146	146	146	146
TOTAL OPERATING COST	598,429	598,429	645,900	663,766	664	664	664	664
BY MEANS OF FINANCING								
GENERAL FUND	6.00*	6.00*	6.00*	6.00*	6.0*	6.0*	6.0*	6.0*
SPECIAL FUND	484,429	484,429	531,900	549,766	550	550	550	550
	114,000	114,000	114,000	114,000	114	114	114	114
TOTAL POSITIONS	6.00*	6.00*	6.00*	6.00*	6.00*	6.00*	6.00*	6.00*
TOTAL PROGRAM COST	598,429	598,429	645,900	663,766	664	664	664	664

PROGRAM ID: HTH906
 PROGRAM STRUCTURE: 050501
 PROGRAM TITLE: STATE HEALTH PLANNING AND DEVELOPMENT AGENCY

	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21
MEASURES OF EFFECTIVENESS								
1. % CERTIF OF NEED APPL DOCUMTNG RELATIN TO HSFP	95	95	95	95	95	95	95	95
2. % OF CON APPL APPRVD BASED ON FINDGS REL TO HSFP	85	85	85	85	85	85	85	85
3. % SHCC MTG TIME SPENT ON REVWNG/RECOM ON CON APPL	25	25	25	25	25	25	25	25
4. % SHCC MEETG TIME SPENT ON REVWNG/REVSG/APPRV HSFP	30	30	30	30	30	30	30	30
5. % SAC MTG TIME SPENT ON REVWNG/RECOM ON CON APPL	35	35	35	35	35	35	35	35
6. % SAC MEETG TIME SPENT ON REVWNG/REVSG/APPRV HSFP	35	35	35	35	35	35	35	35
7. PERCENT OF PREVIOUS YEAR'S CON APPROVALS MONITORED	100	100	100	100	100	100	100	100
8. % HTH CARE FAC SUBM SEMI-ANN REPTS W/IN SPCFD TIME	95	95	95	95	95	95	95	95
9. % USRS RATG SEMI-ANN REPTS AS HELPFUL/VERY HELPFUL	90	90	90	90	90	90	90	90
10. NUMBER OF SPECIAL REPORTS PUBLISHED	0	3	2	2	2	2	2	2
PROGRAM TARGET GROUPS								
1. ALL THE PEOPLE OF THE STATE OF HAWAII	1275	1275	1275	1275	1275	1275	1275	1275
2. VOLUNTEERS INVOLVED IN SHCC/SUB-AREA COUNCILS	140	140	140	140	140	140	140	140
3. PUBLIC AND PRIVATE HEALTH CARE SERVICE PROVIDERS	85	85	85	85	85	85	85	85
4. HEALTH CARE RESEARCHERS, DEVELOPERS AND ANALYSTS	35	35	35	35	35	35	35	35
5. HEALTH CARE FOCUSED ASSOCIATIONS	12	12	12	12	12	12	12	12
PROGRAM ACTIVITIES								
1. PLNNG, RESEARCH & REVIEW ACTIV (PROF PERSON DAYS)	790	790	790	790	790	790	790	790
2. DATA MANAGEMENT ACTIVITIES (PROF PERSON DAYS)	212	212	212	212	212	212	212	212
3. HSHCC & SAC SUPPORT & TRAINING (PROF PERSON DAYS)	225	225	225	225	225	225	225	225
PROGRAM REVENUES BY TYPE (IN THOUSANDS of DOLLARS)								
REVENUES FROM THE USE OF MONEY AND PROPERTY		5	5	5	5	5	5	5
CHARGES FOR CURRENT SERVICES	20	30	40	75	130	130	130	130
TOTAL PROGRAM REVENUES	20	35	45	80	135	135	135	135
PROGRAM REVENUES BY FUND (IN THOUSANDS of DOLLARS)								
SPECIAL FUNDS	20	35	45	80	135	135	135	135
TOTAL PROGRAM REVENUES	20	35	45	80	135	135	135	135

NOTE: PROGRAM REVENUES BY TYPE AND FUND MAY NOT BE ACCURATE DUE TO SYSTEM ERROR.

A. Statement of Program Objective(s)

To provide a statewide process that involves consumers and providers of health care in the development and implementation of a Health Services and Facilities Plan for the State of Hawaii which will promote equal access to quality health services at a reasonable cost.

B. Description of Request and Compliance with Section 37-68(1)(A)(B)

None.

C. Description of Activities Performed

1. The Agency develops a State Health Services and Facilities Plan (HSFP) (HRS 323D-15) which is the foundation document upon which all of the Agency's activities are based. It is the result of private health providers, health systems, health plans, public health entities, independent health practitioners, consumers, business and the non-profit sectors planning together for healthier communities.
2. The Agency in accordance with HRS 323D-15 serves as staff for the preparation and revision of the HSFP. The HSFP is revised as necessary. In addition, these revisions provide a more direct connection with the Certificate of Need (CON) program which the Agency administrates.
3. The Agency conducts studies and investigations regarding the causes of health care costs.
4. The Agency and its subarea health planning councils perform health care needs assessments as necessary across the State, based on the health status of the population and access, quality and/or cost issues in the health care delivery system.
5. The Agency and its subarea health planning councils identify statewide and regional priorities.
6. The Agency administers the state's Certificate of Need program for

medical facilities and services in accordance with the HSFP, using the criteria set forth in HRS 323D.

7. The annual Health Care Utilization Report, features data such as hospitals' inpatient bed capacities, current number of nursing home facilities and beds, average length of stay, occupancy rates, average daily census, and total number of procedures for computed tomography, magnetic resonance imaging, radiation therapy, and cardiac catheterization which the Agency collects and analyzes.

8. The Agency maintains a searchable database on its website to assist potential CON applicants and others who use the data.

9. The Agency responds to requests for studies, i.e. requests from the Hawaii State Legislature.

10. The Agency participates on various task forces, committees, and workgroups.

D. Statement of Key Policies Pursued

1. HSFP for the State of Hawaii has both statewide and regional policy priorities. Priorities are determined through a collaborative effort entailing the health status of the population (statewide and regional); understanding the access, quality, and/or cost issues in the health care delivery system that impede health status improvements; and acknowledging changes in the environment, health care delivery system or other related situations.
2. HSFP is used as a guide for establishing the need for proposed health services and facilities requiring a Certificate of Need. Institutional and community agencies use thresholds guides for the development of new, modified or expanded health care facilities and services.

E. Identification of Important Program Relationships

HSFP is relevant to several state initiatives; however, the Agency's major customers are the private sector health providers and health plans, many of whom have integrated HSFP into their own strategic plans.

F. Description of Major External Trends Affecting the Program

1. Changes in the health insurance reimbursement methods and trends in the delivery of care; i.e. Affordable Care Act.
2. New developments in technology will shape the future successes in medical research, pharmaceuticals, information and medical technology, and health care delivery systems.
3. National and local shortages in trained health professionals, physicians, nurses, and other non-physician professionals.
4. The increasing rate of an aging population that will be older and ethnically diverse.
5. The continuing concerns regarding rural health care access and quality of care issues.

G. Discussion of Cost, Effectiveness, and Program Size Data

The Agency partners with the private sector in order to facilitate the health care industry's growth and development. The CON program allows the private sector to add what is needed at minimal adverse impact on the health care system.

From a cost effectiveness standpoint, the Agency, with a staff of six, has produced meaningful outcomes for Hawaii's fourth largest private industry, health care. The Agency is able to manage the review time of certificate of need applications within the statutory required response time 100% of the time. The Agency's periodic revisions of the HSFP and the engagement in

projects that fulfill statewide and regional priorities are supported by the development of collaboratives with the private health industry and other community partnerships, thereby keeping our costs to a minimum. Pursuant to HRS 323D-22, the subarea health planning councils: 1) reviews data and trends; studies service utilization patterns; listens to the community and experts; makes recommendations on the highest priorities for health services and resources development; and submits the respective regional priorities to the Agency for inclusion in the HSFP; and 2) partners with respective stakeholders to strategically address the priorities.

H. Discussion of Program Revenue

Since July 2000, the Agency assessed a filing fee for the processing of CON applications. The amount of revenue collected each year is nominal and varies depending on the number of applications submitted and their total project costs. The 2012 Hawaii State Legislature asked the Agency to increase the filing fee collected for processing CON applications. The proposed increase in the filing fee will require an administrative rule change. The Agency is currently in the process of changing the administrative rule.

I. Summary of Analysis Performed

The HSFP represents an analysis of the health care industry in Hawaii and is based on the partnership between communities statewide and the health care industry.

J. Further Considerations

None.

OPERATING AND CAPITAL APPROPRIATIONS

REPORT P61-A

PROGRAM ID: **HTH760**
 PROGRAM STRUCTURE NO. **050502**
 PROGRAM TITLE: **HEALTH STATUS MONITORING**

PROGRAM EXPENDITURES	IN DOLLARS				IN THOUSANDS			
	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19	FY2019-20	FY2020-21
OPERATING COST	33.50*	33.50*	33.50*	33.50*	33.5*	33.5*	33.5*	33.5*
PERSONAL SERVICES	1,683,602	1,670,269	1,783,877	1,801,219	1,801	1,801	1,801	1,801
OTHER CURRENT EXPENSES	621,613	706,613	723,743	727,743	728	728	728	728
TOTAL OPERATING COST	2,305,215	2,376,882	2,507,620	2,528,962	2,529	2,529	2,529	2,529
BY MEANS OF FINANCING								
GENERAL FUND	29.50*	29.50*	29.50*	29.50*	29.5*	29.5*	29.5*	29.5*
	1,410,190	1,410,190	1,513,151	1,527,496	1,528	1,528	1,528	1,528
SPECIAL FUND	1.00*	1.00*	1.00*	1.00*	1.0*	1.0*	1.0*	1.0*
	660,155	646,822	657,469	660,466	660	660	660	660
OTHER FEDERAL FUNDS	3.00*	3.00*	3.00*	3.00*	3.0*	3.0*	3.0*	3.0*
	234,870	319,870	337,000	341,000	341	341	341	341
TOTAL POSITIONS	33.50*	33.50*	33.50*	33.50*	33.50*	33.50*	33.50*	33.50*
TOTAL PROGRAM COST	2,305,215	2,376,882	2,507,620	2,528,962	2,529	2,529	2,529	2,529

PROGRAM ID: HTH760
 PROGRAM STRUCTURE: 050502
 PROGRAM TITLE: HEALTH STATUS MONITORING

	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21
MEASURES OF EFFECTIVENESS								
1. % VITAL RECORDS ISSUED WITHIN 10 DAYS FROM REQUEST	79	75	75	75	75	75	75	75
2. % OF INTERVIEWS COMPLETED (SURVEY EFFICIENCY)	0	50	50	50	50	50	50	50
3. % TARGETED RESEARCH OR STATISTICS REPORTS DISSEM	80	80	80	80	80	80	80	80
4. MORTALITY RATE (PER THOUSAND)	7.3	7.0	7.0	7.0	7.0	7.0	7.0	7.0
5. AVERAGE LIFE SPAN OF RESIDENTS	80.5	80.5	80.5	80.5	80.5	80.5	80.5	80.5
PROGRAM TARGET GROUPS								
1. DEPARTMENT OF HEALTH PROGRAMS	87	87	87	87	87	87	87	87
2. HAWAIIANS AND OTHER ETHNIC GROUPS	1400000	1400000	1420000	1440000	1460000	1480000	1500000	1520000
3. VITAL EVENT REGISTRANTS	78500	80000	80000	80000	80000	80000	80000	80000
4. RESIDENT NON-INSTITUTIONALIZED POPULATN HOUSEHOLDS	447000	456000	456000	456000	456000	456000	456000	456000
5. ADULT POPULATION 18 AND OVER	1097000	1080000	1090000	1100000	1110000	1120000	1130000	1140000
PROGRAM ACTIVITIES								
1. # OF MAJOR HEALTH STATISTICS REQUESTS FULFILLED	90	90	90	90	90	90	90	90
2. # OF HOUSEHOLDS INTERVIEWED IN HEALTH SURVEY	0	2400	2400	2400	2400	2400	2400	2400
3. # OF VITAL EVENTS REGISTERED	54000	57000	57000	57000	57000	57000	57000	57000
4. # OF VITAL RECORD CERTIFICATES ISSUED	304000	300000	300000	300000	300000	300000	300000	300000
5. # NEW DATA SETS/STAT ITEMS DISSEM ELECTRONICALLY	6	6	6	6	6	6	6	6
PROGRAM REVENUES BY TYPE (IN THOUSANDS of DOLLARS)								
LICENSES, PERMITS, AND FEES	849	826	826	826	826	826	826	826
REVENUE FROM OTHER AGENCIES: FEDERAL	150	150	150	150	150	150	150	150
CHARGES FOR CURRENT SERVICES	936	955	955	955	955	955	955	955
TOTAL PROGRAM REVENUES	1,935	1,931	1,931	1,931	1,931	1,931	1,931	1,931
PROGRAM REVENUES BY FUND (IN THOUSANDS of DOLLARS)								
GENERAL FUNDS	1,485	1,481	1,481	1,481	1,481	1,481	1,481	1,481
SPECIAL FUNDS	300	300	300	300	300	300	300	300
ALL OTHER FUNDS	150	150	150	150	150	150	150	150
TOTAL PROGRAM REVENUES	1,935	1,931	1,931	1,931	1,931	1,931	1,931	1,931

NOTE: PROGRAM REVENUES BY TYPE AND FUND MAY NOT BE ACCURATE DUE TO SYSTEM ERROR.

A. Statement of Program Objective

To collect, process, analyze and disseminate relevant, population-based data in a timely fashion in order to assess the health status of Hawaii's multi-ethnic population and to fulfill health statistical/legal requirements.

B. Description of Request and Compliance with Section 37-68(1)(A)(B)

Adjust federal fund ceiling per estimate of federal receipts and budget instructions (0.00/\$17,130 in other federal funds (P); 0.00/\$21,130P).

C. Description of Activities Performed

1. Operate a statewide system of public health statistics including the collection, filing, amending and issuing of certified copies of birth, death, fetal death, marriage, and civil union records, and other related activities.
2. Provide research and statistical assistance to departmental programs in monitoring and assessing the health status of the state's population.
3. Provide consultative services to departmental programs in the collection of timely and reliable health status information for planning, policy making and program budgeting.
4. Conduct a statewide health survey of households to collect chronic disease and health related information in relation to the demographic, geographic, and socio-economic characteristics of the population.
5. Disseminate health status information via the Department's website.

D. Statement of Key Policies Pursued

1. 100% registration of all births, deaths, marriages, and civil unions and issuance of certified copies upon request.
2. Timely and reliable population-based health status monitoring information for public health assessment, policy development, and quality assurance.

3. Electronic registration and verification systems in lieu of paper-based systems.

E. Identification of Important Program Relationships

The vital statistics program works closely with providers of birth and death information including hospitals and funeral homes and the medical examiners office. The Research and Analysis Section (R&A) works closely with the Department of Health (DOH) programs including the birth defects, Women Infants and Children (WIC), Children with Special Needs, and Immunization programs. In addition, the R&A has developed working relations with many programs outside of the DOH, such as the counties real property agencies, the elections office, Departments of Health and Human Services (DHHS), Tax (DOTAX) Transportation (DOT), Labor (DLIR), Hawaiian Home Lands (DHHL), EUTF, ERS, OHA and the Native Hawaiian Roll Commission.

F. Description of Major External Trends Affecting the Program

1. A cooperative program with the National Center for Health Statistics requiring current flow data from all 50 states to produce national indicators of health status.
2. Demand by State and local agencies for small area (sub-islands) information on health status of residents.
3. Changes in federal government data standards including race classification and standard population age-adjustments for mortality estimation.
4. Demand for electronic verification of records due to increased concerns of national security and identification theft.

G. Discussion of Cost, Effectiveness, and Program Size Data

1. Continue the Hawaii Health Survey. The survey provides valuable public health data, such as health insurance information and can be used to monitor the new insurance mandates.
2. Fully automating the vital records system will result in:
 - a. On-line entry, checking and correction of current vital statistics certificate data through computer terminals.
 - b. Vital records will be accessible via indexes and certified copies will be prepared via computer.
 - c. Response time for verification of current vital record data will take five seconds, and printing of a certified copy by computer will take 30 seconds.
 - d. Better security and fraud prevention. For example temporary marriage and civil union certificates can be verified online in real-time.

H. Discussion of Program Revenue

1. Fees from the issuance of certified copies certificates generated \$304,700 in FY 2014 for the Vital Statistics Improvement Special Fund.
2. Approximately \$300,000 per year is received in contracts and grants from the federal government including the Social Security Administration (SSA) and the National Center for Health Statistics (NCHS)/Centers for Disease Control and Prevention (CDC) for the collection of vital statistics and reporting such to the agencies.
3. Federal grant funds in the amount of \$740,000 for the National Violent Death Registration System (NVDRS). Grant awarded to OHSM to improve accuracy, timeliness and completeness of collecting and reporting violent deaths in the State of Hawaii. Federal funding will be used to purchase supplies, travel costs related to trainings and meetings, contractual costs to create data systems to accommodate violent death information and others costs related to fulfilling project objectives. Approximately \$148,000 was awarded to OHSM in FY 2015 for the first year of the five-year grant.

I. Summary of Analysis Performed

The Hawaii population for the year 2013 is approximately 1.4 million, increasing the demand for certified copies of vital events.

The vital statistics improvement special fund was established to support the continued development of an automated vital records system for the Office. It has been initially used for the conversion of paper records from 1908 into computer records. The next step is to convert records prior to 1908, clean-up existing data in the Vital Statistics System, electronic capture of Intentional Termination Of Pregnancies (ITOP) data, improving the capture of fetal death data and develop new software that will improve the ordering and tracking of vital record requests via the Internet.

Implementation is continuing to reorganize the Office of Health Status Monitoring's organization structure to be consistent with the conversion to an automated vital statistics system and an increased focus on statistical quality control to improve productivity and efficiency in the assessment of the health status of Hawaii's population.

The Health Survey sample size is designed to give only statewide estimates of health parameters. Additional funds need to be found to increase survey sample size for statistical analyses of communities.

J. Further Considerations

Improvements to the Electronic Marriage Registration System and the Electronic Birth Registration System as needed.

OPERATING AND CAPITAL APPROPRIATIONS

REPORT P61-A

PROGRAM ID: **HTH905**
 PROGRAM STRUCTURE NO. **050503**
 PROGRAM TITLE: **DEVELOPMENTAL DISABILITIES COUNCIL**

PROGRAM EXPENDITURES	--IN DOLLARS--				--IN THOUSANDS--			
	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19	FY2019-20	FY2020-21
OPERATING COST	8.00*	8.00*	8.00*	8.00*	8.0*	8.0*	8.0*	8.0*
PERSONAL SERVICES	610,352	610,352	674,066	696,389	697	697	697	697
OTHER CURRENT EXPENSES	86,493	86,493	86,493	86,493	86	86	86	86
TOTAL OPERATING COST	696,845	696,845	760,559	782,882	783	783	783	783
BY MEANS OF FINANCING								
GENERAL FUND	1.50*	1.50*	1.50*	1.50*	1.5*	1.5*	1.5*	1.5*
	218,048	218,048	226,704	229,114	229	229	229	229
FEDERAL FUNDS	6.50*	6.50*	6.50*	6.50*	6.5*	6.5*	6.5*	6.5*
	478,797	478,797	533,855	553,768	554	554	554	554
TOTAL POSITIONS	8.00*	8.00*	8.00*	8.00*	8.00*	8.00*	8.00*	8.00*
TOTAL PROGRAM COST	696,845	696,845	760,559	782,882	783	783	783	783

PROGRAM ID: HTH905
 PROGRAM STRUCTURE: 050503
 PROGRAM TITLE: DEVELOPMENTAL DISABILITIES COUNCIL

	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21
MEASURES OF EFFECTIVENESS								
1. % ACTIV COMPLTD W/IN ESTAB TMEFRM HI STATE DD PLAN	68	80	90	75	85	90	95	95
PROGRAM TARGET GROUPS								
1. INDIVIDUALS WITH DEVELOPMENTAL DISABILITIES	22184	22184	22184	22184	22184	22184	22184	22184
2. FAMILIES OF INDIVIDUALS WITH DEV. DISABILITIES	22184	22184	22184	22184	22184	22184	22184	22184
PROGRAM ACTIVITIES								
1. # INDIV/FAM MEMB PARTIC IN PUB AWARENESS/ED/TRNING	3375	2500	2500	2500	2500	2500	2500	2500
2. NUMBER OF SYSTEMS CHANGE ACTIVITIES	20	20	20	20	20	20	20	20
3. NUMBER OF PROJECTS FUNDED/CO-SPONSORED	2	2	2	2	2	2	2	2
4. NO. LEG MEASURES IMPACTED BY COUNCIL'S ADVCY EFFRT	10	10	10	10	10	10	10	10
5. NO. ADMIN POLICIES IMPACTED BY COUNCIL'S ADVCY EFF	2	2	2	2	2	2	2	2
6. NUMBER OF COLLABORATION/COORDINATION ACTIVITIES	400	400	400	400	400	400	400	400
PROGRAM REVENUES BY TYPE (IN THOUSANDS of DOLLARS)								
REVENUE FROM OTHER AGENCIES: FEDERAL	452	454	454	454	454	454	454	454
TOTAL PROGRAM REVENUES	452	454	454	454	454	454	454	454
PROGRAM REVENUES BY FUND (IN THOUSANDS of DOLLARS)								
SPECIAL FUNDS	452	454	454	454	454	454	454	454
TOTAL PROGRAM REVENUES	452	454	454	454	454	454	454	454

NOTE: PROGRAM REVENUES BY TYPE AND FUND MAY NOT BE ACCURATE DUE TO SYSTEM ERROR.

A. Statement of Program Objective

To assure that individuals with developmental disabilities (DD) and their families participate in the design of, and have access to, culturally competent services, supports and other assistance and opportunities that promote independence, productivity, and integration and inclusion into the community.

B. Description of Request and Compliance with Section 37-68(1)(A)(B)

None.

C. Description of Activities Performed

The Council is a Federally funded program (P.L. 106-402) that is responsible to engage in advocacy, capacity building, and systemic change activities that contribute to a coordinated, consumer- and family-centered, consumer-and family-directed, comprehensive system of community services, individualized supports, and other forms of assistance that enable individuals with DD to exercise self-determination; be independent, be productive, and be integrated and included in all facets of community life. The mission of the Council is to support people with intellectual and developmental disabilities to control their own destiny and determine the quality of life they desire.

The Council conducts systemic change activities that address its Five-Year 2012-2016 State Plan goals of Community Supports, Education, Employment, Health, Children and Youth (Early Childhood), and Self-Advocacy and Self-Determination. Overall activities include policy development, implementation and analysis; educating and informing policymakers and the public about developmental disabilities; developing and supporting coalitions; fostering interagency collaboration and coordination; eliminating barriers and enhancing the design and redesign of systems; coordinating and supporting activities that support the Council's mission; and providing training in

leadership development and legislative advocacy; and researching and demonstrating new approaches and best practices to services and supports.

Specific activities include: 1) conducting review and providing recommendations regarding individual budgets, consumer directed services, service matrix, Medicaid Home and Community-Based Services (HCBS) DD Waiver standards, and the State Coordinated Public Transit Human Services Transportation Plan; 2) supporting the Self-Advocacy Advisory Council and self-advocacy activities; 3) hosting the Self-Advocacy Leadership Summit; 4) coordinating and co-sponsoring the annual Day at the Capitol event and the annual Legislative Forums and transition events on Hawaii, Kauai and Maui; 5) administering the Hawaii Donated Dental Services program contract; 6) conducting training in legislative advocacy; 7) supporting and responding to legislative and administrative measures that impact services and supports to individuals with DD and their families, and maximizes federal and state dollars; 8) participating on various committees to address aging, community supports, early intervention, education, emergency preparedness, employment, health care, independent living, long-term care, medical and oral health, quality assurance, transition, transportation, etc.

D. Statement of Key Policies Pursued

The Council's Five-Year State Plan (FY 2012-FY 2016) for services sets the direction and blueprint for areas of policy development and implementation, and of services and supports for individuals with DD and their families. The State Plan is developed and amended based on community input. Key policies pursued included involving individuals with DD and family members to be active partners in the planning, development, and implementation of policies and programs; implementation of the principles of self-determination; implementation of the HCBS DD Waiver, consumer-directed services, and individual budgeting; defining home and community-based settings; and funding for dental care services, DD Waiver and Intermediate Care Facilities

for Individuals with Intellectual Disabilities, and early intervention; autism insurance coverage, Medicaid Buy-In, and seclusion and restraints legislation.

E. Identification of Important Program Relationships

The Council is comprised of individuals with DD, family members, and representatives from public and private agencies who provide services for individuals with DD. Representatives are from the Departments of Education, Health (DOH), and Human Services (DHS) that include DOH Maternal and Child Health Branch, DHS Med-Quest Division and Division of Vocational Rehabilitation; Executive Office on Aging; Hawaii Disability Rights Center; the University of Hawaii Center on Disability Studies; and non-government and private non-profit service providers. The above agencies are mandated by Federal law to be on the Council to promote coordination and collaboration of services. The Council also works with other State (DOH DD Division, Department of Transportation), County (Aging, Mayor's office), and private organizations (Community Children's Councils, Hilopa'a Family to Family Information Health Center, Hawaii Families as Allies, Hawaii Waiver Providers Association, Learning Disabilities Association of Hawaii, Special Parent Information Network,) on various activities such as the annual Day at the Capitol event, conferences, legislative forums, and transition events. Systems change is accomplished through consistent collaboration with stakeholders to provide them support in areas that address the mission and mandates of the Council, and to provide education, training, and advocacy in areas that differ from or conflict with the direction set by the Council.

F. Description of Major External Trends Affecting the Program

The Administration on Intellectual and DD revised how Councils report on their State Plan activities to better address GPRA (Government Performance and Results Act of 1993). The revised Annual Program Performance Report

template includes performance measures that better demonstrate Councils' outcomes in implementing the federal law.

G. Discussion of Cost, Effectiveness, and Program Size Data

Guided by federal law, the Council's advocacy, capacity building, and systemic change activities cover the life span (birth to death) of individuals with DD and address a comprehensive array of services during the life span. In an effort to operate efficiently and be cost effective to meet federal state plan requirements, state plan activities are implemented by staff and the Council's Governor-appointed members. The Council administers the contract to carry out the Donated Dental Services Program, and provides the staff and fiscal resources for the statewide Self-Advocacy Advisory Council and its activities. The Council recognizes the limited fiscal and staff resources to carry out the federal law requirements, and as a result, prioritizes its State Plan activities.

H. Discussion of Program Revenues

The program receives federal funds under the State DD Councils grant program in accordance with the state's plan under the DD Assistance and Bill of Rights Act of 2000. As a "minimum allotment state" (based on population, economic indicators, etc.), the Council receives the minimum allotment for the program. For FY 2014, the Council's allotment was \$451,553, it is estimated the FY 2015 allotment would be \$453,609 pending a final appropriations bill passed by Congress. This amount is less than the FY 2012 level of \$477,688 prior to the federal sequestration.

I. Summary of Analysis Performed

None.

J. Further Considerations

None.

OPERATING AND CAPITAL APPROPRIATIONS

REPORT P61-A

PROGRAM ID: **HTH907**
 PROGRAM STRUCTURE NO. **050504**
 PROGRAM TITLE: **GENERAL ADMINISTRATION**

PROGRAM EXPENDITURES	IN DOLLARS				IN THOUSANDS			
	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19	FY2019-20	FY2020-21
OPERATING COST	118.50*	119.50*	120.50*	120.50*	120.5*	120.5*	120.5*	120.5*
PERSONAL SERVICES	6,685,416	6,771,504	7,838,120	8,016,925	8,016	8,016	8,016	8,016
OTHER CURRENT EXPENSES	4,033,341	3,129,241	2,525,402	2,531,402	2,532	2,532	2,532	2,532
EQUIPMENT		3,000	6,000					
TOTAL OPERATING COST	10,718,757	9,903,745	10,369,522	10,548,327	10,548	10,548	10,548	10,548
BY MEANS OF FINANCING								
GENERAL FUND	118.50*	119.50*	120.50*	120.50*	120.5*	120.5*	120.5*	120.5*
	9,216,927	9,057,929	8,876,462	9,055,267	9,055	9,055	9,055	9,055
OTHER FEDERAL FUNDS	* 1,501,830	* 845,816	* 1,493,060	* 1,493,060	* 1,493	* 1,493	* 1,493	* 1,493
CAPITAL INVESTMENT APPROPRIATIONS								
DESIGN	1,501,000	725,000	1,000	1,000				
CONSTRUCTION	18,192,000	5,372,000	3,558,000	58,000				
TOTAL CAPITAL APPROPRIATIONS	19,693,000	6,097,000	3,559,000	59,000				
BY MEANS OF FINANCING								
G.O. BONDS	19,693,000	6,097,000	3,559,000	59,000				
TOTAL POSITIONS	118.50*	119.50*	120.50*	120.50*	120.50*	120.50*	120.50*	120.50*
TOTAL PROGRAM COST	30,411,757	16,000,745	13,928,522	10,607,327	10,548	10,548	10,548	10,548

PROGRAM ID: HTH907
 PROGRAM STRUCTURE: 050504
 PROGRAM TITLE: GENERAL ADMINISTRATION

	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21
MEASURES OF EFFECTIVENESS								
1. % ADMIN COSTS IN RELATION TO TOTAL DEPT COST	1	1	1	1	1	1	1	1
2. # ADMIN BILLS ENACTED	6	10	10	10	10	10	10	10
PROGRAM TARGET GROUPS								
1. STATEWIDE POPULATION (THOUSANDS)	1408	1577	1577	1577	1577	1577	1577	1577
2. # OF PROGRAMS & ATTACHED AGENCIES	25	25	25	25	25	25	25	25
3. # AUTHORIZED POSITIONS (PERM & TEMP)	3199	3207	3260	3260	3260	3260	3260	3260
PROGRAM ACTIVITIES								
1. # LEG PROPOSALS TRACKED FOR INFO OR TESTIMONY	1135	1200	1200	1200	1200	1200	1200	1200
2. # ADMIN BILLS INTRODUCED TO BOTH HOUSE & SENATE	25	25	25	25	25	25	25	25
PROGRAM REVENUES BY TYPE (IN THOUSANDS of DOLLARS)								
REVENUE FROM OTHER AGENCIES: FEDERAL	3,700	3,671	3,700	3,700	3,700	3,700	3,700	3,700
CHARGES FOR CURRENT SERVICES	1,060	1,060	1,060	1,060	1,060	1,060	1,060	1,060
TOTAL PROGRAM REVENUES	4,760	4,731	4,760	4,760	4,760	4,760	4,760	4,760
PROGRAM REVENUES BY FUND (IN THOUSANDS of DOLLARS)								
GENERAL FUNDS	4,460	4,460	4,460	4,460	4,460	4,460	4,460	4,460
SPECIAL FUNDS	300	271	300	300	300	300	300	300
TOTAL PROGRAM REVENUES	4,760	4,731	4,760	4,760	4,760	4,760	4,760	4,760

NOTE: PROGRAM REVENUES BY TYPE AND FUND MAY NOT BE ACCURATE DUE TO SYSTEM ERROR.

A. Statement of Program Objective

To enhance program effectiveness and efficiency of overall departmental functions by planning, formulating policies, directing operations and personnel, and by providing other administrative support.

Offices of Hawaii, Maui, and Kauai, and the Office of Planning Policy and Program Development.

B. Description of Request and Compliance with Section 37-68(1)(A)(B)

1. Transfer in 1.00 perm. Program Specialist V (#90270H) and related funding from HTH 495/HB Adult Mental Health Administration to HTH 907/AP Office of Planning, Policy and Program Development, (1.00/\$59,303 in general funds (A); 1.00/\$59,303 A).
2. Housekeeping item to increase federal grant budget according to grant award (0.00/647,244 in other federal funds (P); 0.00/647,244 P).
3. CIP request for Department of Health, Health and Safety, Statewide, Project No. 907161, \$3,559,000 in general obligation bond funds (C) in FY16 and \$59,000 C in FY17.

D. Statement of Key Policies Pursued

The mission of the Department of Health is to monitor, protect, and enhance the health and environment of all people in Hawaii by providing leadership in assessment, policy development, and assurance to promote health and well-being, to preserve a clean, healthy, and natural environment, and to assure basic health care for all. As a health provider of last resort, the department is tasked with ensuring that essential health, life, and safety services that are uninsurable and that cannot or will not be provided by the private sector must necessarily be addressed by the State. Moreover, the Department recognizes that health and safety are requisites for the productivity, participation, and vitality of all of Hawaii's people. In exercising its leadership role, the Department is steadfastly committed to empowering Hawaii's people to exercise their maximum personal responsibility for their health and well-being and to promote programs that prevent the need for future costly health and social service intervention.

C. Description of Activities Performed

Program activities are administrative in nature and involve the development of departmental policy in program planning, overall management, guidance and support of personnel, physical plant facilities, and financial resources as it relates to health, safety, and general support services to the programs in the department. This program includes: Office of the Director, Communications Office, Administrative Services Office, Human Resources Office, Affirmative Action Office, Health Information Systems Office, County District Health

E. Identification of Important Program Relationships

Important program relationships span the department and involve the direct operational programs within the department. This program provides leadership, guidance, and staff support to assist the department's programs in effectively collaborating with other Federal, State, and County agencies, and private sector programs. This program is essential to providing the executive and administrative support functions necessary to manage the operating programs that provide direct health services to the community.

F. Description of Major External Trends Affecting the Program

The program is affected by major external economic and social trends, including increased demands on programs, accountability for resources and services provided, and the economy. These factors affect the involvement of and demands placed on the department, its ability to manage available resources and, in turn, its total productivity and effectiveness.

1. Uncertain fiscal constraints at both the Federal and State levels.
2. Policies and procedures established within other agencies.
3. A continuing effort to maintain compliance with the Health Insurance Portability and Accountability Act (HIPAA).
4. A continuing effort to comply with the Patient Protection and Affordable Care Act of 2009 and statewide healthcare transformation efforts.

G. Discussion of Cost, Effectiveness, and Program Size Data

The cost data for the program is to maintain the present program necessary to provide continuous administrative services.

H. Description of Program Revenues

The program's revenue consists of federal funds from various grants.

I. Summary of Analysis Performed

None.

J. Further Considerations

None.

OPERATING AND CAPITAL APPROPRIATIONS

REPORT P61-A

PROGRAM ID: **HTH908**
 PROGRAM STRUCTURE NO. **050505**
 PROGRAM TITLE: **OFFICE OF LANGUAGE ACCESS**

PROGRAM EXPENDITURES	--IN DOLLARS--				--IN THOUSANDS--			
	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19	FY2019-20	FY2020-21
OPERATING COST	3.00*	3.00*	3.00*	3.00*	3.0*	3.0*	3.0*	3.0*
PERSONAL SERVICES	179,016	179,016	183,890	186,114	186	186	186	186
OTHER CURRENT EXPENSES	133,212	133,212	133,212	133,212	133	133	133	133
TOTAL OPERATING COST	312,228	312,228	317,102	319,326	319	319	319	319
BY MEANS OF FINANCING								
GENERAL FUND	3.00*	3.00*	3.00*	3.00*	3.0*	3.0*	3.0*	3.0*
	312,228	312,228	317,102	319,326	319	319	319	319
TOTAL POSITIONS	3.00*	3.00*	3.00*	3.00*	3.00*	3.00*	3.00*	3.00*
TOTAL PROGRAM COST	312,228	312,228	317,102	319,326	319	319	319	319

PROGRAM ID: HTH908
 PROGRAM STRUCTURE: 050505
 PROGRAM TITLE: OFFICE OF LANGUAGE ACCESS

	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21
<u>MEASURES OF EFFECTIVENESS</u>								
1. % STATE AGENCIES IN COMPLIANCE W/ LANG ACCESS REQ	80	80	80	80	90	90	90	90
<u>PROGRAM TARGET GROUPS</u>								
1. NUMBER OF STATE AGENCIES	20	20	20	20	23	23	23	23
<u>PROGRAM ACTIVITIES</u>								
1. NUMBER OF TECHNICAL ASSISTANCE MEETINGS	30	30	30	30	40	40	40	40
2. NO. LANG PROF BARR ELIM THRU INFORMAL/FORMAL METH	15	15	15	15	15	15	15	15

NOTE: PROGRAM REVENUES BY TYPE AND FUND MAY NOT BE ACCURATE DUE TO SYSTEM ERROR.

Program Plan Narrative

HTH 908: OFFICE OF LANGUAGE ACCESS

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A. Statement of Program Objective

To address the language access needs of Limited English Proficient persons (LEP) and ensure meaningful access to government services, programs and activities for limited English proficient persons by providing oversight, central coordination and technical assistance to state and state-funded agencies.

B. Description of Request and Compliance with Section 37-68(1)(A)(B)

None.

C. Description of Activities Performed

1. Provide technical assistance to State and State-funded agencies.
2. Eliminate language proficiency barriers through informal/formal methods.

D. Statement of Key Policies Pursued

Review and monitor each State agency's language access plan for compliance with Chapter 321C, HRS.

E. Identification of Important Program Relationships

Consult with State agency's language access coordinators, the language access advisory council, and the department directors or their equivalents.

F. Description of Major External Trends Affecting the Program

None.

G. Discussion of Cost, Effectiveness, and Program Size Data

Target groups include:

1. State agencies within the Executive, Legislative, and Judicial branches, including departments, offices, commissions, and boards.
2. Covered entities that involve a person or organization receiving State financial assistance, including grants and purchase of services contracts.

H. Description of Program Revenues

None projected.

I. Summary of Analysis Performed

None.

J. Further Considerations

Program functions with three less positions to perform its function; authorization was initially 6.00 full-time equivalent (FTE) and is currently 3.00 FTE.

OPERATING AND CAPITAL APPROPRIATIONS

REPORT P61-A

PROGRAM ID:
 PROGRAM STRUCTURE NO. 06
 PROGRAM TITLE: SOCIAL SERVICES

PROGRAM EXPENDITURES	IN DOLLARS				IN THOUSANDS			
	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19	FY2019-20	FY2020-21
OPERATING COST	21.00*	21.00*	21.00*	21.00*	21.0*	21.0*	21.0*	21.0*
PERSONAL SERVICES	2,320,408	2,320,408	2,737,143	2,630,577	2,631	2,631	2,631	2,631
OTHER CURRENT EXPENSES	14,859,875	14,746,361	14,252,079	14,147,411	14,148	14,148	14,148	14,148
TOTAL OPERATING COST	17,180,283	17,066,769	16,989,222	16,777,988	16,779	16,779	16,779	16,779
BY MEANS OF FINANCING								
GENERAL FUND	10.74*	10.74*	10.74*	10.74*	10.7*	10.7*	10.7*	10.7*
SPECIAL FUND	9,314,027	8,882,027	8,676,485	8,714,690	8,715	8,715	8,715	8,715
FEDERAL FUNDS	10,000	10,000	10,000	10,000	10	10	10	10
OTHER FEDERAL FUNDS	8.26*	8.26*	8.26*	8.26*	8.3*	8.3*	8.3*	8.3*
INTERDEPT. TRANSFER	7,010,240	6,905,707	7,057,040	7,093,640	7,094	7,094	7,094	7,094
CAPITAL INVESTMENT APPROPRIATIONS	*	*	*	*	*	*	*	*
PLANS	592,678	1,015,697	972,286	678,810	679	679	679	679
CONSTRUCTION	2.00*	2.00*	2.00*	2.00*	2.0*	2.0*	2.0*	2.0*
EQUIPMENT	253,338	253,338	273,411	280,848	281	281	281	281
TOTAL CAPITAL APPROPRIATIONS	280,000	490,000						
BY MEANS OF FINANCING								
G.O. BONDS	280,000	490,000						
TOTAL POSITIONS	21.00*	21.00*	21.00*	21.00*	21.00*	21.00*	21.00*	21.00*
TOTAL PROGRAM COST	17,460,283	17,556,769	16,989,222	16,777,988	16,779	16,779	16,779	16,779

OPERATING AND CAPITAL APPROPRIATIONS

REPORT P61-A

PROGRAM ID: HTH904
 PROGRAM STRUCTURE NO. 060402
 PROGRAM TITLE: EXECUTIVE OFFICE ON AGING

PROGRAM EXPENDITURES	IN DOLLARS				IN THOUSANDS			
	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19	FY2019-20	FY2020-21
OPERATING COST	14.00*	14.00*	14.00*	14.00*	14.0*	14.0*	14.0*	14.0*
PERSONAL SERVICES	1,352,012	1,352,012	1,677,182	1,537,502	1,538	1,538	1,538	1,538
OTHER CURRENT EXPENSES	14,334,308	14,220,794	13,726,512	13,621,844	13,622	13,622	13,622	13,622
TOTAL OPERATING COST	15,686,320	15,572,806	15,403,694	15,159,346	15,160	15,160	15,160	15,160
BY MEANS OF FINANCING								
GENERAL FUND	5.74*	5.74*	5.74*	5.74*	5.7*	5.7*	5.7*	5.7*
	8,083,402	7,651,402	7,374,368	7,386,896	7,387	7,387	7,387	7,387
FEDERAL FUNDS	8.26*	8.26*	8.26*	8.26*	8.3*	8.3*	8.3*	8.3*
	7,010,240	6,905,707	7,057,040	7,093,640	7,094	7,094	7,094	7,094
OTHER FEDERAL FUNDS	* 592,678	* 1,015,697	* 972,286	* 678,810	* 679	* 679	* 679	* 679
CAPITAL INVESTMENT APPROPRIATIONS								
PLANS		1,000						
CONSTRUCTION	279,000	449,000						
EQUIPMENT	1,000	40,000						
TOTAL CAPITAL APPROPRIATIONS	280,000	490,000						
BY MEANS OF FINANCING								
G.O. BONDS	280,000	490,000						
TOTAL POSITIONS	14.00*	14.00*	14.00*	14.00*	14.00*	14.00*	14.00*	14.00*
TOTAL PROGRAM COST	15,966,320	16,062,806	15,403,694	15,159,346	15,160	15,160	15,160	15,160

PROGRAM ID: HTH904
 PROGRAM STRUCTURE: 060402
 PROGRAM TITLE: EXECUTIVE OFFICE ON AGING

	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21
MEASURES OF EFFECTIVENESS								
1. OF ALL PERSONS 60 YEARS AND OLDER, PERCENT SERVED	40	40	39	39	38	38	37	37
2. OF ALL REG CLIENTS, % SERVED A MEAL	85	85	85	85	85	85	85	85
3. OF ALL REG CLIENTS % LIVING ALONE	35	35	35	35	35	35	35	35
4. OF ALL REG CLIENTS % BELOW POVERTY LEVEL	27	27	27	27	27	27	27	27
5. OF ALL REG CLIENTS % WHO ARE CAREGIVERS	18	18	18	19	20	21	22	23
6. OF ALL REG CLIENTS, % DIFFIC DOING 1 OR MORE ADL	45	45	45	46	47	48	49	50
7. % OF ADCRC CLIENTS WHO RECEIVED A REFERRAL	51	51	51	52	53	54	55	56
8. % OMBUDSMAN PROGRAM CASES RESPOND TO WIN 72 HRS	100	100	100	100	100	100	100	100
PROGRAM TARGET GROUPS								
1. NUMBER OF PERSONS AGE 60 YEARS AND OLDER	285841	293481	30800	323400	339600	356600	375500	394000
2. # OF PERSONS AGE >= 60 BELOW POVERTY LEVEL	21576	22162	23200	24300	25500	26800	28000	29000
3. # OF PERSONS WHO ACCESSED THE ADCRC	32000	32000	34000	36000	38000	40000	42000	44000
4. # PERSONS AGE 60 & OLDER W/1 OR MORE DISABILITIES	109819	112754	118400	124300	130500	137000	144000	151200
5. # RESDTS IN LIC LTC NRSG HOMES/ARCH/ASST LVG FACIL	10217	10217	10500	10700	10900	11000	13000	15000
PROGRAM ACTIVITIES								
1. NUMBER OF CONG/HOME DEL MEALS SERVED TO CLIENTS	726000	726000	726100	726200	726200	726300	726400	726500
2. NUMBER OF CASE MGT SERVICES REC'D BY CLIENTS	26000	26000	26100	26200	26300	26400	26500	26600
3. # PERS CARE, HMKR, AND CHORE SVCS REC'D BY CLIENTS	72000	72000	72000	72000	73000	73000	73000	73000
4. # OF REFERRALS TO ADCRC CLIENTS FOR PUB/PVT SVCS	18000	19000	20000	21000	22000	23000	24000	25000
5. # OF FAMILY CG SUPPORT SVCS REC'D BY REG CLIENTS	25500	25500	25600	25700	25800	25900	26000	26100
6. # OF ACTIVE CASES IN THE OMBUDSMAN PROGRAM	115	115	100	115	120	125	130	135
7. # OF CONTACTS MADE TO ADCRC	36000	38000	40000	42000	44000	46000	48000	50000
PROGRAM REVENUES BY TYPE (IN THOUSANDS of DOLLARS)								
REVENUE FROM OTHER AGENCIES: FEDERAL	6,838	6,577	6,322	6,322	6,322	6,322	6,322	6,322
REVENUE FROM OTHER AGENCIES: ALL OTHER	450	460	460	460	460	460	460	460
TOTAL PROGRAM REVENUES	7,288	7,037	6,782	6,782	6,782	6,782	6,782	6,782
PROGRAM REVENUES BY FUND (IN THOUSANDS of DOLLARS)								
SPECIAL FUNDS	7,288	6,853	6,782	6,782	6,782	6,782	6,782	6,782
ALL OTHER FUNDS		184						
TOTAL PROGRAM REVENUES	7,288	7,037	6,782	6,782	6,782	6,782	6,782	6,782

NOTE: PROGRAM REVENUES BY TYPE AND FUND MAY NOT BE ACCURATE DUE TO SYSTEM ERROR.

A. Statement of Program Objectives

To enable persons to live, to the greatest extent possible, healthy, dignified and independent lives by assuring an accessible, responsive, and comprehensive system of services through advocacy, planning, coordination, research and evaluation.

B. Description of Request and Compliance with Section 37-68(1)(A)(B)

1. Housekeeping request to adjust federal fund (N) ceiling to conform with the Form FF process in FB 2015-17.
(0.00/\$47,937N; 0.00/\$47,937N).
2. Housekeeping request to adjust other federal fund (P) ceiling to conform with the Form FF process in FB 2015-17.
(0.00/- \$43,411P; 0.00/- \$336,887P)

C. Description of Activities Performed

The Executive Office on Aging (EOA) performs a wide range of activities that includes providing statewide leadership for the development and review of policies and programs for older adults as articulated by the State Plan on Aging; developing a State Plan for submission to the U.S. Administration on Aging (US AOA) resulting in funding under the Older Americans Act; serving as the clearinghouse for aging policies and information; recognizing older adults as resources; maintaining an efficient statewide database system to identify and define the aging population in Hawaii; overseeing a statewide, person-centered, comprehensive home and community based system of services; assisting in the protection of elders from abuse and neglect; and promoting and establishing basic services for family caregivers.

D. Statement of Key Policies Pursued

The EOA is the lead State agency that serves all adults 60 years and older and family caregivers in the State of Hawaii. As authorized by the U.S. AOA and HRS, Chapter 349, the EOA is responsible for assuring information about and access to opportunities and services for older adults and for seeking resources that will help meet the needs of the diverse older population. The Office applies for and receives federal and other grants in order to implement mandates set by the Older Americans Act and the HRS.

E. Identification of Important Program Relationships

The Area Agencies on Aging, the Hawaii Aging Network of community organizations, advocates and service providers, and the Department of Health are principal collaborators in promoting healthy aging to delay and prevent the need for more costly direct health services. The EOA also collaborates with other government agencies, the private sector, and the community in most, if not all, of its programs and projects.

F. Description of Major External Trends Affecting the Program

Demand for in-home and community-based services for frail and vulnerable older adults will increase. There are over 95,000 persons aged 60 and over who have a disability. At present, the agency is serving over 6,000 in home and community based services, but will require greater capacity to meet the demand with the aging of the baby boomer generation. As the population ages, more persons are expected to rely upon home-based assistance, to delay and prevent institutional placements.

Services for family caregivers. Congress established the National Family Caregiver Support Program that calls for states to provide multi-faceted systems of support services to family caregivers. These family caregivers contribute annually to the nation's health care system by providing unpaid care at home at a significant reduction in cost to Medicare and Medicaid.

Expansion of target population to include the disabled. As EOA works to create fully functioning Aging and Disability Resource Centers (ADRC) statewide, it will work to provide services for the disabled.

G. Discussion of Cost, Effectiveness, and Program Size Data

The EOA presently serves about 39 percent of the State's 60+ population of more than 255,000, and also serves family caregivers. Through its network of Area Agencies on Aging, EOA provides a wide range of services that help Hawaii's most vulnerable and frail elderly remain in the desired home setting as long as possible.

H. Discussion of Program Revenues

None.

I. Summary of Analysis Performed

None.

J. Further Considerations

None.

OPERATING AND CAPITAL APPROPRIATIONS

REPORT P61-A

PROGRAM ID: HTH520
 PROGRAM STRUCTURE NO. 060403
 PROGRAM TITLE: DISABILITY & COMMUNICATIONS ACCESS BOARD

PROGRAM EXPENDITURES	-IN DOLLARS-				-IN THOUSANDS-			
	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19	FY2019-20	FY2020-21
OPERATING COST	7.00*	7.00*	7.00*	7.00*	7.0*	7.0*	7.0*	7.0*
PERSONAL SERVICES	968,396	968,396	1,059,961	1,093,075	1,093	1,093	1,093	1,093
OTHER CURRENT EXPENSES	525,567	525,567	525,567	525,567	526	526	526	526
TOTAL OPERATING COST	1,493,963	1,493,963	1,585,528	1,618,642	1,619	1,619	1,619	1,619
BY MEANS OF FINANCING								
GENERAL FUND	5.00*	5.00*	5.00*	5.00*	5.0*	5.0*	5.0*	5.0*
SPECIAL FUND	1,230,625	1,230,625	1,302,117	1,327,794	1,328	1,328	1,328	1,328
INTERDEPT. TRANSFER	10,000	10,000	10,000	10,000	10	10	10	10
	2.00*	2.00*	2.00*	2.00*	2.0*	2.0*	2.0*	2.0*
	253,338	253,338	273,411	280,848	281	281	281	281
TOTAL POSITIONS	7.00*	7.00*	7.00*	7.00*	7.00*	7.00*	7.00*	7.00*
TOTAL PROGRAM COST	1,493,963	1,493,963	1,585,528	1,618,642	1,619	1,619	1,619	1,619

PROGRAM ID: HTH520
PROGRAM STRUCTURE: 060403
PROGRAM TITLE: DISABILITY AND COMMUNICATION ACCESS BOARD

	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21
MEASURES OF EFFECTIVENESS								
1. % OF PARKING PERMITS ISSUED WITHIN 2 WEEKS	100	100	100	100	100	100	100	100
2. % OF INCOMING REQUESTS FULFILLED	90	90	90	90	90	90	90	90
3. % OF OBJECTIVES IN DCAB PLAN OF ACTION COMPLETED	90	90	90	90	90	90	90	90
4. % SIGN LANG INTERPRETERS TESTD WHO ARE CREDENTIALD	100	100	100	100	100	100	100	100
5. % OF DOCUMENT REVIEWS WITHOUT DISCREPANCIES	60	60	60	60	60	60	60	60
PROGRAM TARGET GROUPS								
1. PERSONS WITH DISABILITIES	244463	244463	244463	244463	244463	244463	244463	244463
PROGRAM ACTIVITIES								
1. # NEWSLETTERS, FACT SHEETS & BROCHURES DISTRBTD	19	25	25	25	25	25	25	25
2. # SIGN LANGUAGE INTERPRETERS TESTED	10	25	25	25	25	25	25	25
3. # INFO/REFERRAL & TECH ASST REQUESTS RECEIVED	2041	2000	2000	2000	2000	2000	2000	2000
4. # DISABLED PERSONS PARKING PERMITS ISSUED	31056	30000	30000	30000	30000	30000	30000	30000
5. # PUBLIC INFO & EDUCATION TRNG SESSIONS CONDUCTED	47	50	50	50	50	50	50	50
6. # BLUEPRINT DOCUMENTS REVIEWED	1084	1000	1000	1000	1000	1000	1000	1000
7. # INTERPRET OPINIONS/SITE SPECFC ALT DESIGNS ISSUD	2	5	5	5	5	5	5	5
8. # FED/STATE/COUNTY PUBLIC POLICY RECOMMENDATIONS	42	40	40	40	40	40	40	40
9. # ADVISORY COMMITTEES WHO ARE ACTIVE PARTICPANTS	15	15	15	15	15	15	15	15
PROGRAM REVENUES BY TYPE (IN THOUSANDS of DOLLARS)								
CHARGES FOR CURRENT SERVICES	1,119	752	752	752	752	752	752	752
TOTAL PROGRAM REVENUES	1,119	752	752	752	752	752	752	752
PROGRAM REVENUES BY FUND (IN THOUSANDS of DOLLARS)								
SPECIAL FUNDS	1,119	752	752	752	752	752	752	752
TOTAL PROGRAM REVENUES	1,119	752	752	752	752	752	752	752

NOTE: PROGRAM REVENUES BY TYPE AND FUND MAY NOT BE ACCURATE DUE TO SYSTEM ERROR.

A. Statement of Program Objectives

To ensure that persons with disabilities are provided equal access to programs, services, activities, employment opportunities, and facilities to participate fully and independently in society.

B. Description of Request and Compliance with Section 37-68(1)(A)(B)

No status quo budget requests.

C. Description of Activities Performed

1. Administer the Statewide program for parking for disabled persons, in accordance with Part III of Chapter 291, Hawaii Revised Statutes (HRS).
2. Established guidelines for the design of buildings, facilities, and sites by or on behalf of the State and counties in accordance with Section 103-50, HRS. Provide review and recommendations on all State and county plans for buildings, facilities, and sites in accordance with Section 103-50, HRS.
3. Establish guidelines for the utilization of communication access services provided for persons who are deaf, hard of hearing, or deaf-blind in State programs. Guidelines include, but are not limited to, determining the qualifications of interpreters who may provide services, the amount of payment to interpreters and the credentialing of interpreters who do not hold national certification via state screening process.
4. Serve as the designated State agency to coordinate the efforts of the State to comply with the requirements of the Americans with Disabilities Act for access to services, employment, telecommunications, and facility and site designs.
5. Provide technical assistance and guidance to, but not limited to, State and county entities in order to meet the requirements of state, federal and county laws, providing access for persons with disabilities through public education programs and other voluntary compliance efforts.

6. Serve as public advocate of persons with disabilities by providing advice and recommendations on matters relating to access for persons with disabilities, with emphasis on legislative matters, administrative rules, policies, and procedures of State and county governments.
7. Review and assess the problems and needs relating to access for persons with disabilities in the State in order to provide recommendations in the improvement of laws and services.

D. Statement of Key Policies Pursued

The Disability and Communication Access Board (DCAB) is mandated by Section 348F, HRS and has a required function of document reviews under Section 103-50, HRS and parking coordination under Chapter 291, Part III, HRS.

Key policies pursued are based on implementation of various federal and state laws including, but not limited to, the Americans with Disabilities Act (ADA), the Federal Fair Housing Act, the Individuals with Disabilities Education Act, the Air Carrier Access Act, the Telecommunications Act, Section 504 of the Rehabilitation Act, the Uniform Handicapped Parking Systems Law, state civil rights laws, and state and county building codes and design standards.

E. Identification of Important Program Relationships

At the federal level, the DCAB establishes liaisons with the U.S. Department of Justice, U.S. Equal Employment Opportunity Commission, the U.S. Access Board, the U.S. Department of Transportation, the U.S. Department of Housing and Urban Development, and the Federal Communications Commission, all of which enforce laws relating to the civil rights or access of persons with disabilities. DCAB is often the State of Hawaii's contact point for information dissemination and technical assistance from those agencies on

new developments in rules and regulations. DCAB is the State contact for provisions of technical assistance on the ADA through the Pacific ADA Center.

At the State level, DCAB serves as coordinator for ADA compliance of all State agencies. Twenty-nine (29) ADA Coordinators in each department implement guidance and programs provided by DCAB.

DCAB also enters into a memorandum of agreement with the State Department of Education to operate the Special Parent Information Network, a parent-based information system for parents of special needs children, in fulfillment of the Individuals with Disabilities Education Act (IDEA).

At the county level, DCAB provides technical assistance in implementation of the ADA to the four (4) county ADA Coordinators. DCAB enters into Memoranda of Agreement (MOA) with the four (4) counties to issue first time and replacement placards to qualified persons with mobility disabilities. The MOA specifies a per unit cost to reimburse the counties for this function. DCAB also interacts with the counties in the review of construction documents per Section 103-50, HRS for access to persons with disabilities.

F. Description of Major External Trends Affecting the Program

DCAB currently oversees the administration of the statewide program for handicapped parking under Chapter 291, Part III, HRS, under the federal P.L. 100-641, the Uniform Handicapped System Parking Law. This involves the issuance of parking placards to eligible persons with disabilities to allow them to park in stalls reserved for such use. Issuance of first time and replacement parking placards are done by the four (4) counties. Counties are reimbursed \$12 per placard issued. The increase in number of persons with mobility impairments, in part due to an aging society, will result in increasing annual costs in DCAB's budget.

The Department of Justice adopted amendments to the ADA including new design standards, guidelines on service animals, mobility devices, communication access, and standards for residential facilities. These amendments will require additional compliance for state and county agencies and new guidelines for review under Section 103-50, HRS.

G. Discussion of Cost, Effectiveness, and Program Size Data

No significant data to report.

H. Discussion of Program Revenues

Nominal revenues (approximately \$2,000 to \$3,000 per year) are generated by applicants taking the Hawaii Quality Assurance System (HQAS) test for sign language interpreter credentialing. Monies collected are used to offset testing costs.

Beginning January 1, 2013, DCAB began collecting a fee for blueprint review services under Section 103-50, HRS. This revenue supports our request for a trade-off to move a portion of the Facility Access Unit from general to special funds.

I. Summary of Analysis Performed

None.

J. Further Considerations

None.



Capital Budget Details

STATE OF HAWAII

PROGRAM ID

PROGRAM STRUCTURE NO.

PROGRAM TITLE

HTH-840

040101

ENVIRONMENTAL MANAGEMENT

**REQUIRED CAPITAL APPROPRIATIONS - BY CAPITAL PROJECT
IN THOUSANDS OF DOLLARS**

REPORT B78

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PROJECT NUMBER	PRIORITY NUMBER	LOC	SCOPE	PROJECT TITLE	BUDGET PERIOD								SUCCEED YEARS			
					COST ELEMENT/MOF	PROJECT TOTAL	PRIOR YRS	FY 13-14	FY 14-15	FY 15-16	FY 16-17	FY 17-18		FY 18-19	FY 19-20	FY 20-21
840141	1		NEW	WASTEWATER TREATMENT REVOLVING FUND FOR POLLUTION CONTROL, STATEWIDE												
			CONSTRUCTION		395,697	369,405	13,146	13,146								
			TOTAL		395,697	369,405	13,146	13,146								
			FEDERAL FUNDS		285,505	263,613	10,946	10,946								
			G.O. BONDS		110,192	105,792	2,200	2,200								
840142	2		NEW	SAFE DRINKING WATER REVOLVING FUND, STATEWIDE												
			CONSTRUCTION		200,947	179,047	10,950	10,950								
			TOTAL		200,947	179,047	10,950	10,950								
			FEDERAL FUNDS		166,948	148,698	9,125	9,125								
			G.O. BONDS		33,999	30,349	1,825	1,825								
840161			NEW	WASTEWATER TREATMENT REVOLVING FUND FOR POLLUTION CONTROL, STATEWIDE												
			CONSTRUCTION		26,062				13,031	13,031						
			TOTAL		26,062				13,031	13,031						
			G.O. BONDS		4,344				2,172	2,172						
			FEDERAL FUNDS		21,718				10,859	10,859						
840162			NEW	SAFE DRINKING WATER REVOLVING FUND, STATEWIDE												
			CONSTRUCTION		21,228				10,614	10,614						
			TOTAL		21,228				10,614	10,614						
			G.O. BONDS		3,538				1,769	1,769						
			FEDERAL FUNDS		17,690				8,845	8,845						

STATE OF HAWAII

REQUIRED CAPITAL APPROPRIATIONS - BY CAPITAL PROJECT
IN THOUSANDS OF DOLLARS

REPORT B78

PROGRAM ID HTH-840

PROGRAM STRUCTURE NO. 040101

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PROGRAM TITLE ENVIRONMENTAL MANAGEMENT

PROJECT NUMBER	PRIORITY NUMBER	LOC	SCOPE	PROJECT TITLE	BUDGET PERIOD						SUCCEED YEARS	
					COST ELEMENT/MOF	PROJECT TOTAL	PRIOR YRS	FY 13-14	FY 14-15	FY 15-16		FY 16-17
PROGRAM TOTALS												
			CONSTRUCTION		1,512,718	1,417,236	24,096	24,096	23,645	23,645		
			TOTAL		1,512,718	1,417,236	24,096	24,096	23,645	23,645		
			G.O. BONDS		386,328	370,396	4,025	4,025	3,941	3,941		
			FEDERAL FUNDS		1,126,390	1,046,840	20,071	20,071	19,704	19,704		

STATE OF HAWAII

REQUIRED CAPITAL APPROPRIATIONS - BY CAPITAL PROJECT
IN THOUSANDS OF DOLLARS

REPORT B78

PROGRAM ID HTH-100
PROGRAM STRUCTURE NO. 05010101
PROGRAM TITLE COMMUNICABLE DISEASE & PUBLIC HEALTH NUR

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PROJECT NUMBER	PRIORITY NUMBER	LOC	SCOPE	PROJECT TITLE	BUDGET PERIOD						SUCCEED YEARS			
					PROJECT TOTAL	PRIOR YRS	FY 13-14	FY 14-15	FY 15-16	FY 16-17		FY 17-18	FY 18-19	FY 19-20
100151	6		RENOVATION	KALAUPAPA SETTLEMENT IMPROVEMENTS, MOLOKAI										
			DESIGN		2	1		1						
			CONSTRUCTION		1,449	929		520						
			TOTAL		1,451	930		521						
			G.O. BONDS		1,451	930		521						
PROGRAM TOTALS														
			DESIGN		53	52		1						
			CONSTRUCTION		2,838	2,318		520						
			TOTAL		2,891	2,370		521						
			G.O. BONDS		2,891	2,370		521						

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PROGRAM STRUCTURE NO. **050106**PROGRAM TITLE **HEALTH RESOURCES ADMINISTRATION**

PROJECT NUMBER	PRIORITY NUMBER	LOC	SCOPE	PROJECT TITLE				BUDGET PERIOD						SUCCEED YEARS	
				COST ELEMENT/MOF	PROJECT TOTAL	PRIOR YRS	FY 13-14	FY 14-15	FY 15-16	FY 16-17	FY 17-18	FY 18-19	FY 19-20		FY 20-21
P11032			NEW	MOLOKAI OHANA HEALTH CENTER, MOLOKAI											
			DESIGN	51	1	50									
			CONSTRUCTION	1,449	999	450									
			TOTAL	1,500	1,000	500									
			G.O. BONDS	1,500	1,000	500									
P12028			NEW	MAI'ANAEO COAST COMPREHENSIVE HEALTH CENTER (WCCHC), OAHU											
			CONSTRUCTION	2,500	2,000	500									
			TOTAL	2,500	2,000	500									
			G.O. BONDS	2,500	2,000	500									
P12029			NEW	HAWAII ISLAND COMMUNITY DEVELOPMENT CORPORATION, HAWAII											
			PLANS	1	1										
			LAND	383	383										
			DESIGN	1	1										
			CONSTRUCTION	1,000		1,000									
			TOTAL	1,385	385	1,000									
			G.O. BONDS	1,385	385	1,000									
P12030			NEW	LANAI COMMUNITY HEALTH CENTER, LANAI											
			PLANS	1	1										
			DESIGN	1	1										
			CONSTRUCTION	2,248	498	1,750									
			TOTAL	2,250	500	1,750									
			G.O. BONDS	2,250	500	1,750									

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PROGRAM ID

PROGRAM STRUCTURE NO.

PROGRAM TITLE

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050106

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PROJECT NUMBER	PRIORITY NUMBER	LOC	SCOPE	PROJECT TITLE		BUDGET PERIOD						SUCCEED YEARS		
						PROJECT TOTAL	PRIOR YRS	FY 13-14	FY 14-15	FY 15-16	FY 16-17		FY 17-18	FY 18-19
P14040			NEW	KALIHI-PALAMA HEALTH CENTER, OAHU										
			CONSTRUCTION	3,000		3,000								
			TOTAL	3,000		3,000								
			G.O. BONDS	3,000		3,000								
P15042			NEW	HANA HEALTH, MAUI										
			PLANS	1		1								
			DESIGN	1		1								
			CONSTRUCTION	198		198								
			TOTAL	200		200								
			G.O. BONDS	200		200								
P15043			NEW	WEST HAWAII COMMUNITY HEALTH CENTER, HAWAII										
			CONSTRUCTION	1,000		1,000								
			TOTAL	1,000		1,000								
			G.O. BONDS	1,000		1,000								
P15044			NEW	J. WALTER CAMERON CENTER, MAUI										
			CONSTRUCTION	2,225		2,225								
			TOTAL	2,225		2,225								
			G.O. BONDS	2,225		2,225								

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PROGRAM STRUCTURE NO. **050106**PROGRAM TITLE **HEALTH RESOURCES ADMINISTRATION**

PROJECT NUMBER	PRIORITY NUMBER	LOC	SCOPE	PROJECT TITLE					BUDGET PERIOD					SUCCEED YEARS	
				COST ELEMENT/MOF	PROJECT TOTAL	PRIOR YRS	FY 13-14	FY 14-15	FY 15-16	FY 16-17	FY 17-18	FY 18-19	FY 19-20		FY 20-21
P15045			NEW	PUNA COMMUNITY MEDICAL CENTER, HAWAII											
			PLANS	100				100							
			DESIGN	650				650							
			TOTAL	750				750							
			G.O. BONDS	750				750							
P15046			NEW	THE WAHIAWA CENTER FOR COMMUNITY HEALTH, OAHU											
			PLANS	100				100							
			DESIGN	149				149							
			CONSTRUCTION	1				1							
			TOTAL	250				250							
			G.O. BONDS	250				250							
P15047			NEW	HAWAII ISLAND VETERANS MEMORIAL, HAWAII											
			CONSTRUCTION	425				425							
			TOTAL	425				425							
			G.O. BONDS	425				425							
				PROGRAM TOTALS											
			PLANS	658	457			201							
			LAND	384	384										
			DESIGN	1,854	1,004	50		800							
			CONSTRUCTION	30,133	19,584	4,950		5,599							
			EQUIPMENT	2	2										
			TOTAL	33,031	21,431	5,000		6,600							
			G.O. BONDS	33,031	21,431	5,000		6,600							

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PROGRAM STRUCTURE NO. 050201

PROGRAM TITLE HAWAII HEALTH SYSTEMS CORP - CORP OFFICE

PROJECT NUMBER	PRIORITY NUMBER	LOC	SCOPE	PROJECT TITLE	BUDGET PERIOD							SUCCEED YEARS
					COST ELEMENT/MOF	PROJECT TOTAL	PRIOR YRS	FY 13-14	FY 14-15	FY 15-16	FY 16-17	
210001			NEW	HAWAII HEALTH SYS CORP, HOSPITAL INFORMATION / ELECTRONIC MEDICAL RECORD SYSTEM, STATEWIDE								
			EQUIPMENT	27,680	13,000	14,321	359					
			TOTAL	27,680	13,000	14,321	359					
			G.O. BONDS	27,680	13,000	14,321	359					
				PROGRAM TOTALS								
			PLANS	112	112							
			DESIGN	18,446	18,446							
			CONSTRUCTION	38,791	38,791							
			EQUIPMENT	28,254	13,574	14,321	359					
			TOTAL	85,603	70,923	14,321	359					
			G.O. BONDS	85,603	70,923	14,321	359					

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PROGRAM TITLE KAHUKU HOSPITAL

PROJECT NUMBER	PRIORITY NUMBER	LOC	SCOPE	PROJECT TITLE	BUDGET PERIOD								SUCCEED YEARS		
					COST ELEMENT/MOF	PROJECT TOTAL	PRIOR YRS	FY 13-14	FY 14-15	FY 15-16	FY 16-17	FY 17-18		FY 18-19	FY 19-20
P14041			NEW	KAHUKU MEDICAL CENTER, OAHU											
			PLANS		1			1							
			DESIGN		1			1							
			CONSTRUCTION		1,459			1,459							
			EQUIPMENT		1			1							
			TOTAL		1,462			1,462							
			G.O. BONDS		1,462			1,462							
PROGRAM TOTALS															
			PLANS		1			1							
			DESIGN		1			1							
			CONSTRUCTION		1,459			1,459							
			EQUIPMENT		1			1							
			TOTAL		1,462			1,462							
			G.O. BONDS		1,462			1,462							

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PROGRAM ID **HTH-212**PROGRAM STRUCTURE NO. **050203**PROGRAM TITLE **HAWAII HEALTH SYSTEMS CORPORATION - REGI**

PROJECT NUMBER	PRIORITY NUMBER	LOC	SCOPE	PROJECT TITLE		BUDGET PERIOD						SUCCEED YEARS		
						PROJECT TOTAL	PRIOR YRS	FY 13-14	FY 14-15	FY 15-16	FY 16-17		FY 17-18	FY 18-19
P14042			NEW	HAWAII HEALTH SYSTEMS CORPORATION, LUMP SUM CIP, STATEWIDE										
			PLANS	1		1								
			DESIGN	2,531		1	2,530							
			CONSTRUCTION	68,767		39,997	28,770							
			EQUIPMENT	8,701		1	8,700							
			TOTAL	80,000		40,000	40,000							
			G.O. BONDS	80,000		40,000	40,000							
P15048			NEW	MAUI MEMORIAL-HOSPITAL PARKING STRUCTURE, MAUI										
			PLANS	1		1								
			DESIGN	1		1								
			CONSTRUCTION	34,598		34,598								
			TOTAL	34,600		34,600								
			REVENUE BONDS	31,500		31,500								
			G.O. BONDS	3,100		3,100								
P15049			NEW	VA LONG-TERM CARE FACILITY, OAHU										
			PLANS	2,000		2,000								
			DESIGN	3,500		3,500								
			TOTAL	5,500		5,500								
			FEDERAL FUNDS	3,500		3,500								
			G.O. BONDS	2,000		2,000								
211601			RENOVATION	EAST HAWAII REGION, PHOTOVOLTAIC PROJECT, HAWAII										
			PLANS	315	235			40	40					
			DESIGN	160				80	80					
			CONSTRUCTION	4,752				2,280	2,472					
			TOTAL	5,227	235			2,400	2,592					
			G.O. BONDS	5,227	235			2,400	2,592					

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PROGRAM TITLE HAWAII HEALTH SYSTEMS CORPORATION - REGI

PROJECT NUMBER	PRIORITY NUMBER	LOC	SCOPE	PROJECT TITLE		BUDGET PERIOD						SUCCEED YEARS		
						PROJECT TOTAL	PRIOR YRS	FY 13-14	FY 14-15	FY 15-16	FY 16-17		FY 17-18	FY 18-19
215601			RENOVATION	KONA COMMUNITY HOSPITAL, PATIENT SHOWERS AND BATHROOM RENOVATIONS										
			DESIGN	50				50						
			CONSTRUCTION	850				850						
			TOTAL	900				900						
			G.O. BONDS	900				900						
215602			RENOVATION	KONA COMMUNITY HOSPITAL, ELECTRICAL IMPROVEMENTS, HAWAII										
			DESIGN	100				100						
			CONSTRUCTION	1,400				1,400						
			TOTAL	1,500				1,500						
			G.O. BONDS	1,500				1,500						
215603			RENOVATION	KONA COMMUNITY HOSPITAL, HOSPITAL RENOVATIONS, HAWAII										
			DESIGN	200				200						
			CONSTRUCTION	2,392				2,392						
			TOTAL	2,592				2,592						
			G.O. BONDS	2,592				2,592						
221601			REPLACEMENT	MAUI MEMORIAL MEDICAL CENTER, REPLACEMENT OF TWO CHILLERS, MAUI										
			DESIGN	100				100						
			CONSTRUCTION	300				300						
			EQUIPMENT	1,600				1,600						
			TOTAL	2,000				2,000						
			G.O. BONDS	2,000				2,000						

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PROGRAM ID **HTH-212**PROGRAM STRUCTURE NO. **050203**PROGRAM TITLE **HAWAII HEALTH SYSTEMS CORPORATION - REGI**

PROJECT NUMBER	PRIORITY NUMBER	LOC	SCOPE	PROJECT TITLE		BUDGET PERIOD						SUCCEED YEARS						
						PROJECT TOTAL	PRIOR YRS	FY 13-14	FY 14-15	FY 15-16	FY 16-17		FY 17-18	FY 18-19	FY 19-20	FY 20-21		
221602			REPLACEMENT	MAUI MEMORIAL MEDICAL CENTER, UPGRADE OF														CLINICAL PATIENT MONITORING SYSTEMS, MAUI
			DESIGN		1					1								
			CONSTRUCTION		99					99								
			EQUIPMENT		300					300								
			TOTAL		400					400								
			G.O. BONDS		400					400								
221603			RENOVATION	MAUI MEMORIAL MEDICAL CTR, UPGRADE PLUMBING														INCLUDING FIRE PROTECTION PLUMBING, MAUI
			DESIGN		430	238				192								
			CONSTRUCTION		4,172	2,272				1,900								
			EQUIPMENT		900	400				500								
			TOTAL		5,502	2,910				2,592								
			G.O. BONDS		5,502	2,910				2,592								
231601			RENOVATION	WEST KAUAI MEDICAL CENTER, NURSING FACILITY														RENOVATIONS, KAUAI
			DESIGN		70					70								
			CONSTRUCTION		580					580								
			TOTAL		650					650								
			G.O. BONDS		650					650								
231602			OTHER	WEST KAUAI MEDICAL CENTER, MEDICAL AIR														SYSTEM, KAUAI
			EQUIPMENT		50					50								
			TOTAL		50					50								
			G.O. BONDS		50					50								

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PROGRAM TITLE **HAWAII HEALTH SYSTEMS CORPORATION - REGI**

PROJECT NUMBER	PRIORITY NUMBER	LOC	SCOPE	PROJECT TITLE		BUDGET PERIOD						SUCCEED YEARS		
				PROJECT TOTAL	PRIOR YRS	FY 13-14	FY 14-15	FY 15-16	FY 16-17	FY 17-18	FY 18-19		FY 19-20	FY 20-21
231603			REPLACEMENT	KAUAI VETERANS MEMORIAL HOSPITAL, ELECTRICAL UPGRADE, KAUAI										
			DESIGN	115								115		
			CONSTRUCTION	985								985		
			TOTAL	1,100								1,100		
			G.O. BONDS	1,100								1,100		
231604			REPLACEMENT	KAUAI VETERANS MEMORIAL HOSPITAL, IRRIGATION SYSTEM UPGRADE, KAUAI										
			DESIGN	31								31		
			CONSTRUCTION	219								219		
			TOTAL	250								250		
			G.O. BONDS	250								250		
232601			RENOVATION	SAMUEL MAHELONA MEMORIAL HOSPITAL, ENDOSCOPY SUITE EXPANSION, KAUAI										
			DESIGN	50								50		
			CONSTRUCTION	150								150		
			EQUIPMENT	100								100		
			TOTAL	300								300		
			G.O. BONDS	300								300		
232602			RENOVATION	SAMUEL MAHELONA MEMORIAL HOSPITAL, PSYCHIATRIC UNIT RENOVATION, KAUAI										
			DESIGN	70								70		
			CONSTRUCTION	530								530		
			TOTAL	600								600		
			G.O. BONDS	600								600		

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PROJECT NUMBER	PRIORITY NUMBER	LOC	SCOPE	PROJECT TITLE		BUDGET PERIOD						SUCCEED YEARS		
				COST ELEMENT/MOF	PROJECT TOTAL	PRIOR YRS	FY 13-14	FY 14-15	FY 15-16	FY 16-17	FY 17-18		FY 18-19	FY 19-20
232603			RENOVATION	SAMUEL MAHELONA MEMORIAL HOSPITAL, RENOVATE NURSES' STATION, KAUAI										
			DESIGN	43					43					
			CONSTRUCTION	257					257					
			TOTAL	300					300					
			G.O. BONDS	300					300					
232604			REPLACEMENT	SAMUEL MAHELONA MEMORIAL HOSPITAL, EMERGENCY GENERATOR, KAUAI										
			DESIGN	61					61					
			CONSTRUCTION	289					289					
			EQUIPMENT	150					150					
			TOTAL	500					500					
			G.O. BONDS	500					500					
232605			REPLACEMENT	SAMUEL MAHELONA MEMORIAL HOSPITAL, REPLACE DENTAL OFFICE CHAIRS AND EQUIPMENT, KAUAI										
			EQUIPMENT	32					32					
			TOTAL	32					32					
			G.O. BONDS	32					32					
232606			OTHER	SAMUEL MAHELONA MEMORIAL HOSPITAL, EXPAND AND RESURFACE PARKING LOTS, KAUAI										
			DESIGN	31					31					
			CONSTRUCTION	219					219					
			TOTAL	250					250					
			G.O. BONDS	250					250					

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PROGRAM STRUCTURE NO. **050203**PROGRAM TITLE **HAWAII HEALTH SYSTEMS CORPORATION - REGI**

PROJECT NUMBER	PRIORITY NUMBER	LOC	SCOPE	PROJECT TITLE		BUDGET PERIOD						SUCCEED YEARS		
				PROJECT TOTAL	PRIOR YRS	FY 13-14	FY 14-15	FY 15-16	FY 16-17	FY 17-18	FY 18-19		FY 19-20	FY 20-21
241601			OTHER	MALUHIA, SPALLING REPAIRS AND REPAINTING OF HOSPITAL, OAHU										
			DESIGN	80								80		
			CONSTRUCTION	520								520		
			TOTAL	600								600		
			G.O. BONDS	600								600		
241602			RENOVATION	MALUHIA, REPAIR CMU WALL AND REROUTE GAS LINE, OAHU										
			DESIGN	20								20		
			CONSTRUCTION	80								80		
			TOTAL	100								100		
			G.O. BONDS	100								100		
241603			ADDITION	MALUHIA, INSTALL ROOF OVER SUNDECK, OAHU										
			DESIGN	100								100		
			CONSTRUCTION	700								700		
			TOTAL	800								800		
			G.O. BONDS	800								800		
241604			RENOVATION	MALUHIA, UPGRADE PATIENT ROOMS, OAHU										
			DESIGN	50								50		
			CONSTRUCTION	421								421		
			TOTAL	471								471		
			G.O. BONDS	471								471		

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PROGRAM TITLE **HAWAII HEALTH SYSTEMS CORPORATION - REGI**

PROJECT NUMBER	PRIORITY NUMBER	LOC	SCOPE	PROJECT TITLE				BUDGET PERIOD					SUCCEED YEARS	
				COST ELEMENT/MOF	PROJECT TOTAL	PRIOR YRS	FY 13-14	FY 14-15	FY 15-16	FY 16-17	FY 17-18	FY 18-19		FY 19-20
242601			OTHER	LEAHI HOSPITAL, RELOCATE TB UNIT, OAHU										
			DESIGN		28					28				
			CONSTRUCTION		122					122				
			TOTAL		150					150				
			G.O. BONDS		150					150				
242602			RENOVATION	LEAHI HOSPITAL, RENOVATE VACANT SPACES IN YOUNG, ATHERTON AND ADMIN BUILDINGS, OAHU										
			DESIGN		115					115				
			CONSTRUCTION		935					935				
			TOTAL		1,050					1,050				
			G.O. BONDS		1,050					1,050				
242603			ADDITION	LEAHI HOSPITAL, CONSTRUCT ACCESSIBLE WALKWAYS, OAHU										
			DESIGN		80					80				
			CONSTRUCTION		520					520				
			TOTAL		600					600				
			G.O. BONDS		600					600				
242604			OTHER	LEAHI HOSPITAL, SPALLING REPAIRS AND PAINTING OF ATHERTON BUILDING, OAHU										
			DESIGN		70					70				
			CONSTRUCTION		530					530				
			TOTAL		600					600				
			G.O. BONDS		600					600				

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PROGRAM TITLE **HAWAII HEALTH SYSTEMS CORPORATION - REGI**

PROJECT NUMBER	PRIORITY NUMBER	LOC	SCOPE	PROJECT TITLE		BUDGET PERIOD						SUCCEED YEARS		
						PROJECT TOTAL	PRIOR YRS	FY 13-14	FY 14-15	FY 15-16	FY 16-17		FY 17-18	FY 18-19
242605			RENOVATION	LEAHI HOSPITAL, REROOF PORTE COCHERE, OAHU										
			DESIGN	28								28		
			CONSTRUCTION	122								122		
			TOTAL	150								150		
			G.O. BONDS	150								150		
242607			RENOVATION	LEAHI HOSPITAL, UPGRADE PATIENT ROOMS, OAHU										
			DESIGN	125								125		
			CONSTRUCTION	346								346		
			TOTAL	471								471		
			G.O. BONDS	471								471		
PROGRAM TOTALS														
			PLANS	2,739	657	1	2,001	40	40					
			DESIGN	11,248	3,246	1	6,031	918	1,052					
			CONSTRUCTION	204,373	81,790	39,997	63,368	8,842	10,376					
			EQUIPMENT	18,744	7,311	1	8,700	2,200	532					
			TOTAL	237,104	93,004	40,000	80,100	12,000	12,000					
			REVENUE BONDS	31,500			31,500							
			FEDERAL FUNDS	3,500			3,500							
			G.O. BONDS	202,104	93,004	40,000	45,100	12,000	12,000					

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PROGRAM STRUCTURE NO. **050302**PROGRAM TITLE **ADULT MENTAL HEALTH - INPATIENT**

PROJECT NUMBER	PRIORITY NUMBER	LOC	SCOPE	PROJECT TITLE	BUDGET PERIOD							SUCCEED YEARS		
					COST ELEMENT/MOF	PROJECT TOTAL	PRIOR YRS	FY 13-14	FY 14-15	FY 15-16	FY 16-17		FY 17-18	FY 18-19
430142	7		RENOVATION	HAWAII STATE HOSPITAL, REPAIRS AND IMPROVEMENTS, OAHU										
			DESIGN		2,031	1,730	300	1						
			CONSTRUCTION		14,417	12,684	950	783						
			TOTAL		16,448	14,414	1,250	784						
			G.O. BONDS		16,448	14,414	1,250	784						
430143			RENOVATION	HAWAII STATE HOSPITAL, OAHU										
			DESIGN		500		500							
			CONSTRUCTION		2,000		2,000							
			TOTAL		2,500		2,500							
			G.O. BONDS		2,500		2,500							
430151	7		NEW	HAWAII STATE HOSPITAL, NEW PATIENT FACILITY AT GODDARD BUILDING, OAHU										
			DESIGN		2,500		2,500							
			CONSTRUCTION		1		1							
			TOTAL		2,501		2,501							
			G.O. BONDS		2,501		2,501							
PROGRAM TOTALS														
			DESIGN		5,854	2,553	800	2,501						
			CONSTRUCTION		28,587	24,853	2,950	784						
			TOTAL		34,441	27,406	3,750	3,285						
			G.O. BONDS		34,441	27,406	3,750	3,285						

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PROGRAM TITLE ALCOHOL & DRUG ABUSE

PROJECT NUMBER	PRIORITY NUMBER	LOC	SCOPE	PROJECT TITLE		BUDGET PERIOD						SUCCEED YEARS		
						PROJECT TOTAL	PRIOR YRS	FY 13-14	FY 14-15	FY 15-16	FY 16-17		FY 17-18	FY 18-19
P15050			NEW	THE ALCOHOLIC REHABILITATION SERVICES OF HAWAII, INC., OAHU										
			CONSTRUCTION			1,500		1,500						
			TOTAL			1,500		1,500						
			G.O. BONDS			1,500		1,500						
PROGRAM TOTALS														
			CONSTRUCTION			1,500		1,500						
			TOTAL			1,500		1,500						
			G.O. BONDS			1,500		1,500						

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PROGRAM ID HTH-501

PROGRAM STRUCTURE NO. 050305

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PROGRAM TITLE DEVELOPMENTAL DISABILITIES

PROJECT NUMBER	PRIORITY NUMBER	LOC	SCOPE	PROJECT TITLE	BUDGET PERIOD						SUCCEED YEARS	
					PROJECT TOTAL	PRIOR YRS	FY 13-14	FY 14-15	FY 15-16	FY 16-17		FY 17-18
PROGRAM TOTALS												
				DESIGN	125	125						
				CONSTRUCTION	1,375	1,375						
				TOTAL	1,500	1,500						
				G.O. BONDS	1,500	1,500						

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PROGRAM ID HTH-610

PROGRAM STRUCTURE NO. 050401

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PROGRAM TITLE ENVIRONMENTAL HEALTH SERVICES

PROJECT NUMBER	PRIORITY NUMBER	LOC	SCOPE	PROJECT TITLE	BUDGET PERIOD						SUCCEED YEARS	
					PROJECT TOTAL	PRIOR YRS	FY 13-14	FY 14-15	FY 15-16	FY 16-17		FY 17-18
PROGRAM TOTALS												
				DESIGN	54	54						
				CONSTRUCTION	546	546						
				TOTAL	600	600						
				G.O. BONDS	600	600						

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PROGRAM ID HTH-710

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PROGRAM TITLE STATE LABORATORY SERVICES

PROJECT NUMBER	PRIORITY NUMBER	LOC	SCOPE	PROJECT TITLE	BUDGET PERIOD						SUCCEED YEARS	
					PROJECT TOTAL	PRIOR YRS	FY 13-14	FY 14-15	FY 15-16	FY 16-17		FY 17-18
PROGRAM TOTALS												
			DESIGN		62	62						
			CONSTRUCTION		1,272	1,272						
			TOTAL		1,334	1,334						
			G.O. BONDS		1,334	1,334						

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PROGRAM ID HTH-760

PROGRAM STRUCTURE NO. 050502

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PROGRAM TITLE HEALTH STATUS MONITORING

PROJECT NUMBER	PRIORITY NUMBER	LOC	SCOPE	PROJECT TITLE	BUDGET PERIOD								SUCCEED YEARS
					PROJECT TOTAL	PRIOR YRS	FY 13-14	FY 14-15	FY 15-16	FY 16-17	FY 17-18	FY 18-19	
PROGRAM TOTALS													
				DESIGN	36	36							
				CONSTRUCTION	214	214							
				TOTAL	250	250							
				G.O. BONDS	250	250							

**REQUIRED CAPITAL APPROPRIATIONS - BY CAPITAL PROJECT
IN THOUSANDS OF DOLLARS**

PROGRAM ID **HTH-907**PROGRAM STRUCTURE NO. **050504**

PROGRAM TITLE

GENERAL ADMINISTRATION

PROJECT NUMBER	PRIORITY NUMBER	LOC	SCOPE	PROJECT TITLE	BUDGET PERIOD								SUCCEED YEARS		
					COST ELEMENT/MOF	PROJECT TOTAL	PRIOR YRS	FY 13-14	FY 14-15	FY 15-16	FY 16-17	FY 17-18		FY 18-19	FY 19-20
907141	2		RENOVATION	DEPARTMENT OF HEALTH, HEALTH AND SAFETY, STATEWIDE											
			DESIGN		1,817	845	500	472							
			CONSTRUCTION		20,911	13,411	4,500	3,000							
			TOTAL		22,728	14,256	5,000	3,472							
			G.O. BONDS		22,728	14,256	5,000	3,472							
907142	4		RENOVATION	DEPARTMENT OF HEALTH, ENERGY EFFICIENCY IMPROVEMENTS, STATEWIDE											
			DESIGN		1,797	797	1,000								
			CONSTRUCTION		8,798	4,508	3,665	625							
			TOTAL		10,595	5,305	4,665	625							
			G.O. BONDS		10,595	5,305	4,665	625							
907143	1		RENOVATION	WAIMANO RIDGE, IMPROVEMENTS TO BUILDINGS AND SITE, OAHU											
			DESIGN		472	218	1	253							
			CONSTRUCTION		13,774	2,000	10,027	1,747							
			TOTAL		14,246	2,218	10,028	2,000							
			G.O. BONDS		14,246	2,218	10,028	2,000							
907161	3		RENOVATION	DEPARTMENT OF HEALTH, HEALTH AND SAFETY, STATEWIDE											
			DESIGN		2				1	1					
			CONSTRUCTION		3,616				3,558	58					
			TOTAL		3,618				3,559	59					
			G.O. BONDS		3,618				3,559	59					

STATE OF HAWAII

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PROGRAM ID HTH-907

PROGRAM STRUCTURE NO. 050504

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PROGRAM TITLE GENERAL ADMINISTRATION

PROJECT NUMBER	PRIORITY NUMBER	LOC	SCOPE	PROJECT TITLE	BUDGET PERIOD						SUCCEED YEARS	
					COST ELEMENT/MOF	PROJECT TOTAL	PRIOR YRS	FY 13-14	FY 14-15	FY 15-16		FY 16-17
PROGRAM TOTALS												
			DESIGN		9,623	7,395	1,501	725	1	1		
			CONSTRUCTION		103,882	76,702	18,192	5,372	3,558	58		
			TOTAL		113,505	84,097	19,693	6,097	3,559	59		
			G.O. BONDS		113,505	84,097	19,693	6,097	3,559	59		

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PROGRAM ID **HTH-904**

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PROGRAM STRUCTURE NO. **060402**PROGRAM TITLE **EXECUTIVE OFFICE ON AGING**

PROJECT NUMBER	PRIORITY NUMBER	LOC	SCOPE	PROJECT TITLE		BUDGET PERIOD						SUCCEED YEARS		
				PROJECT TOTAL	PRIOR YRS	FY 13-14	FY 14-15	FY 15-16	FY 16-17	FY 17-18	FY 18-19		FY 19-20	FY 20-21
P14051			NEW	LANAKILA PACIFIC, OAHU										
			CONSTRUCTION	279		279								
			EQUIPMENT	1		1								
			TOTAL	280		280								
			G.O. BONDS	280		280								
P15062			NEW	HALE MAKUA HEALTH SERVICES, MAUI										
			PLANS	1		1								
			CONSTRUCTION	149		149								
			TOTAL	150		150								
			G.O. BONDS	150		150								
P15063			NEW	KOKUA KALHI VALLEY, GULIC ELDER CENTER, OAHU										
			CONSTRUCTION	300		300								
			EQUIPMENT	40		40								
			TOTAL	340		340								
			G.O. BONDS	340		340								
PROGRAM TOTALS														
			PLANS	1		1								
			CONSTRUCTION	3,228	2,500	279	449							
			EQUIPMENT	41		1	40							
			TOTAL	3,270	2,500	280	490							
			G.O. BONDS	3,270	2,500	280	490							