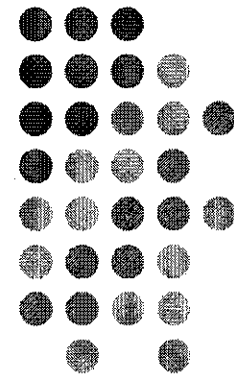
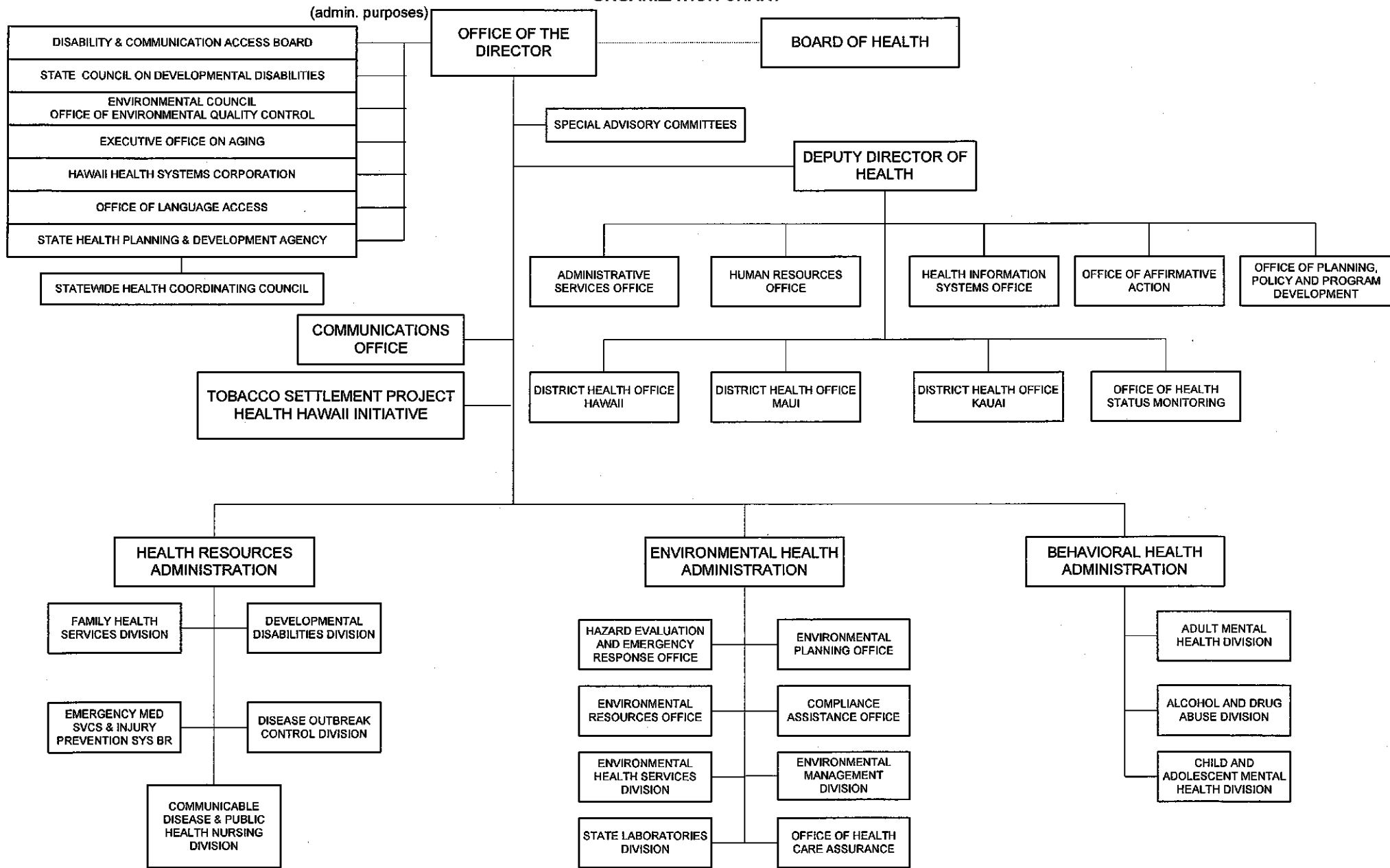


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**Department of Health**



**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.

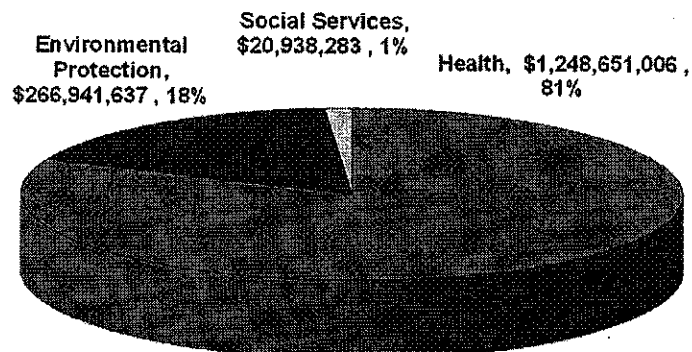
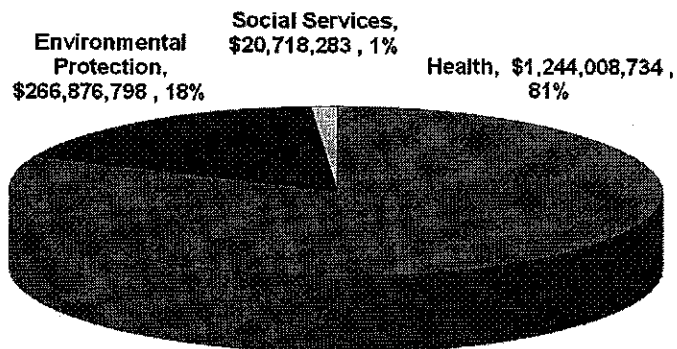
***Department Goals***

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 2014</u>	<u>FY 2015</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 2013-2015 Operating Budget by Major Program Area



## 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 Services  
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 Tobacco Settlement  
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)**

		<b>Budget Base</b>		
		<b>FY 2014</b>	<b>FY 2014</b>	<b>FY 2015</b>
<b>Funding Sources:</b>	Positions	2,015.86	2,054.86	2,055.86
General Funds	\$	400,233,024	421,824,280	420,910,191
		146.00	165.50	168.50
Special Funds		196,033,066	200,865,642	206,572,772
		353.86	269.46	269.46
Federal Funds		130,305,110	88,006,746	88,006,746
		0.00	71.40	71.40
Other Federal Funds		0	39,650,677	39,650,677
		5.50	5.00	5.00
Interdepartmental Transfers		6,280,221	4,673,193	4,673,193
		72.20	76.20	76.20
Revolving Funds		168,389,505	168,550,097	168,684,167
		2,593.42	2,642.42	2,646.42
<b>Total Requirements</b>		<b>901,240,926</b>	<b>923,570,635</b>	<b>928,497,746</b>

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

1. Trade-off/transfers to realign budget to meet ongoing requirements and reflect program reorganizations.
2. Trade-off/transfers for ceiling adjustments to reflect Federal and Other Federal Funds.
3. Adds \$2.6 million in FY14 and \$3.1 million in FY 15 to address Developmental Disability Program shortfalls.
4. Adds 8.00 positions and \$6,052,778 in FY 14 and \$6,493,955 in FY 15 for early childhood initiatives. (New Day Initiative)
5. Adds \$1.0 million in FY 14 and FY 15 for the continuation of expanded ambulance services for Nanakuli and Ewa Beach originally appropriated by Act 268, SLH 2012.
6. Adds \$4.2 million in FY 14 and FY 15 for the continuation of the Kupuna Care program. (New Day Initiative)

7. Adds \$1.4 million in FY 14 and FY 15 for the Aging and Disability Resource Centers. (New Day Initiative)
8. Adds \$80,000 in FY14 and \$300,000 in FY15 for the Executive Office on Aging, Long Term Care. (New Day Initiative)
9. Adds \$1,000,000 in FY14 and FY15 to provide for the State Health Information Exchange services and Hawaii Health Emergency Surveillance system.
10. Transfers 3.00 permanent positions and funds of \$312,228 in FY14 and FY15 from the Department of Labor for the Office of Language Access, pursuant to Act 201, SLH 2012.
11. Transfers 1.00 permanent position and funds of \$481,106 in FY15 from the Department of Human Services to consolidate the state licensing and federal certification of medical and health care facilities, pursuant to Act 93, SLH 2012.
12. Increases the special fund ceiling for the Trauma System Special Fund by \$5,343,833 in FY15.
13. Increases the special fund ceiling for the Community Health Centers Special Fund by \$3,750,000 in FY14 and FY15.

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

		<b>Budget Base</b>		
		<b>FY 2014</b>	<b>FY 2014</b>	<b>FY 2015</b>
<b>Funding Sources:</b>	Positions	0.00	0.00	0.00
General Funds	\$	83,640,000	84,440,000	84,440,000
		2,835.25	2,835.25	2,835.25
Special Funds		522,593,180	523,593,180	523,593,180
		2,835.25	2,835.25	2,835.25
<b>Total Requirements</b>		606,233,180	608,033,180	608,033,180

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

1. Adds \$800,000 in FY 14 and FY 15 for the Hale Makamae program at Kula Hospital.
2. Adds \$1,000,000 in special funds in FY 14 and FY 15 to increase the ceiling for Ali'i Community Care.



OPERATING AND CAPITAL APPROPRIATIONS

REPORT P61-A

PROGRAM ID:

PROGRAM STRUCTURE NO.

PROGRAM TITLE: DEPARTMENT OF HEALTH

PROGRAM EXPENDITURES	--IN DOLLARS--				--IN THOUSANDS--			
	FY2011-12	FY2012-13	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19
CURRENT LEASE PAYMENTS								
OTHER CURRENT EXPENSES	12,627,796	12,500,796	14,381,000	11,520,000	11,520	11,520	11,520	11,520
TOTAL CURRENT LEASE PAYMENTS C	12,627,796	12,500,796	14,381,000	11,520,000	11,520	11,520	11,520	11,520
BY MEANS OF FINANCING								
GENERAL FUND	6,796	6,796						
SPECIAL FUND	12,621,000	12,494,000	14,381,000	11,520,000	11,520	11,520	11,520	11,520
OPERATING COST	5,420.67*	5,439.67*	5,477.67*	5,481.67*	5,481.8*	5,481.8*	5,481.8*	5,481.8*
PERSONAL SERVICES	513,375,049	562,306,610	556,629,505	568,329,724	568,330	568,330	568,330	568,330
OTHER CURRENT EXPENSES	901,940,424	928,788,751	958,538,469	954,816,761	954,815	954,815	954,815	954,815
EQUIPMENT	1,701,204	1,647,651	2,054,841	1,864,441	1,864	1,864	1,864	1,864
MOTOR VEHICLE	55,000							
TOTAL OPERATING COST	1,417,071,677	1,492,743,012	1,517,222,815	1,525,010,926	1,525,009	1,525,009	1,525,009	1,525,009
BY MEANS OF FINANCING								
GENERAL FUND	2,016.86*	2,015.86*	2,054.86*	2,055.86*	2,055.9*	2,055.9*	2,055.9*	2,055.9*
	466,256,565	479,821,549	506,264,280	505,350,191	505,350	505,350	505,350	505,350
SPECIAL FUND	2,977.25*	2,981.25*	3,000.75*	3,003.75*	3,003.8*	3,003.8*	3,003.8*	3,003.8*
	658,124,679	704,303,468	710,077,822	718,645,952	718,645	718,645	718,645	718,645
FEDERAL FUNDS	352.86*	364.86*	269.46*	269.46*	269.5*	269.5*	269.5*	269.5*
	121,129,701	134,164,625	88,006,746	88,006,746	88,009	88,009	88,009	88,009
OTHER FEDERAL FUNDS	*	*	71.40*	71.40*	71.4*	71.4*	71.4*	71.4*
			39,650,677	39,650,677	39,649	39,649	39,649	39,649
INTERDEPT. TRANSFER	3.50*	5.50*	5.00*	5.00*	5.0*	5.0*	5.0*	5.0*
	3,296,248	6,257,009	4,673,193	4,673,193	4,672	4,672	4,672	4,672
FEDERAL STIMULUS FUNDS	*	*	*	*	*	*	*	*
REVOLVING FUND	70.20*	72.20*	76.20*	76.20*	76.2*	76.2*	76.2*	76.2*
	168,264,484	168,196,361	168,550,097	168,684,167	168,684	168,684	168,684	168,684
CAPITAL INVESTMENT APPROPRIATIONS								
PLANS	6,000	1,058,000	4,802,000	500,000				
LAND ACQUISITION	1,000	383,000						
DESIGN	4,964,000	1,848,000	2,608,000	3,066,000				
CONSTRUCTION	89,246,000	93,816,000	47,641,000	56,501,000	4,650			
EQUIPMENT	7,353,000	10,101,000	22,943,000	14,029,000				

OPERATING AND CAPITAL APPROPRIATIONS

REPORT P61-A

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

PROGRAM EXPENDITURES	IN DOLLARS				IN THOUSANDS			
	FY2011-12	FY2012-13	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19
TOTAL CAPITAL APPROPRIATIONS	101,570,000	107,206,000	77,994,000	74,096,000	4,650			
BY MEANS OF FINANCING								
G.O. BONDS	72,216,000	77,852,000	57,923,000	54,025,000	4,650			
FEDERAL FUNDS	29,354,000	29,354,000	20,071,000	20,071,000				
TOTAL POSITIONS	5,420.67*	5,439.67*	5,477.67*	5,481.67*	5,481.80*	5,481.80*	5,481.80*	5,481.80*
TOTAL PROGRAM COST	1,531,269,473	1,612,449,808	1,609,597,815	1,610,626,926	1,541,179	1,536,529	1,536,529	1,536,529

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

	<u>FY 2014</u>	<u>FY 2015</u>
<b>Funding Sources:</b>		
General Obligation Bonds	7,923,000	4,025,000
Federal Funds	20,071,000	20,071,000
<b>Total Requirements</b>	27,994,000	24,096,000

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

1. Adds \$2,200,000 and \$10,946,000 in federal funds in FY 14 and in FY 15 for Wastewater Treatment Revolving Fund, Statewide.
2. Adds \$1,825,000 and \$9,125,000 in federal funds in FY 14 and in FY 15 for Safe Drinking Water Revolving Fund, Statewide.
3. Adds \$1,938,000 in FY 14 for Department of Health, Health & Safety, Statewide.
4. Adds \$1,250,000 in FY 14 for Hawaii State Hospital, Repairs & Improvements, Oahu.
5. Adds \$710,000 in FY 14 for Department of Health, Energy Efficiency Improvements, Statewide.

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

	<b>FY 2014</b>	<b>FY 2015</b>
<b>Funding Sources:</b>		
General Obligation Bonds	50,000,000	50,000,000
<b>Total Requirements</b>	<b>50,000,000</b>	<b>50,000,000</b>

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

1. Adds \$14,321,000 in FY14 and \$359,000 in FY 15 for the Electronic Medical Record System.
2. Adds \$1,500,000 in FY 14 and \$500,000 in FY 15 for a master plan at the Leahi Hospital.
3. Adds \$2,200,000 in FY 14 to replace air conditioning chillers at the Kauai Veterans Memorial Hospital.
4. Adds \$2,000,000 in FY 14 to upgrade the generators at the Kona Community Hospital.
5. Adds \$5,000,000 in FY 14 and \$6,878,000 in FY 15 for repairs to the Acute Hospital at the Hilo Medical Center.
6. Adds \$2,500,000 in FY 14 and \$3,500,000 in FY 15 to expand the Laboratory, Pharmacy, Oncology and Imaging Departments at the Maui Memorial Medical Center.
7. Adds \$2,250,000 in FY 14 to upgrade the electrical circuits and wiring throughout the Kona Community Hospital.
8. Adds \$2,500,000 in FY 14 and \$1,000,000 in FY 15 for repairs to the Kula Hospital.
9. Adds \$3,600,000 in FY 15 to replace air conditioning chillers at the Hilo Medical Center.
10. Adds \$5,000,000 in FY 15 for repairs to the Maui Memorial Medical Center.
11. Adds \$4,500,000 in FY 15 for plumbing repairs to the Maui Memorial Medical Center.
12. Adds \$4,500,000 in FY 15 for CT Renovation and Replacement at the Hilo Medical Center.

STATE OF HAWAII  
 PROGRAM ID  
 PROGRAM STRUCTURE NO.  
 PROGRAM TITLE

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

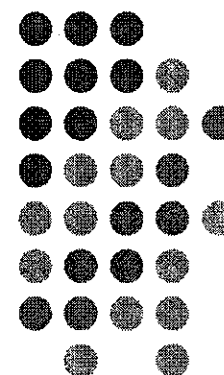
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**DEPARTMENT OF HEALTH**

PROJECT NUMBER	PRIORITY NUMBER	LOC	SCOPE	PROJECT TITLE	BUDGET PERIOD							SUCCEED YEARS		
					PROJECT TOTAL	PRIOR YRS	FY 11-12	FY 12-13	FY 13-14	FY 14-15	FY 15-16		FY 16-17	FY 17-18
			COST ELEMENT/MOF											
			PLANS	9,361	2,995	6	1,058	4,802	500					
			LAND	3,735	3,351	1	383							
			DESIGN	45,259	32,773	4,964	1,848	2,608	3,066					
			CONSTRUCTION	1,809,776	1,517,922	89,246	93,816	47,641	56,501	4,650				
			EQUIPMENT	58,580	4,154	7,353	10,101	22,943	14,029					
			<b>TOTAL</b>	<b>1,926,711</b>	<b>1,561,195</b>	<b>101,570</b>	<b>107,206</b>	<b>77,994</b>	<b>74,096</b>	<b>4,650</b>				
			G.O. BONDS	839,729	573,063	72,216	77,852	57,923	54,025	4,650				
			FEDERAL FUNDS	1,086,982	988,132	29,354	29,354	20,071	20,071					

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## 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			
	FY2011-12	FY2012-13	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19
OPERATING COST	241.00*	246.00*	259.00*	259.00*	259.0*	259.0*	259.0*	259.0*
PERSONAL SERVICES	17,040,959	16,664,778	18,003,294	18,391,316	18,390	18,390	18,390	18,390
OTHER CURRENT EXPENSES	247,751,367	247,751,367	248,488,739	248,187,556	248,187	248,187	248,187	248,187
EQUIPMENT	358,765	362,765	384,765	362,765	363	363	363	363
TOTAL OPERATING COST	265,151,091	264,778,910	266,876,798	266,941,637	266,940	266,940	266,940	266,940
BY MEANS OF FINANCING								
GENERAL FUND	51.00*	51.00*	54.00*	54.00*	54.0*	54.0*	54.0*	54.0*
3,842,578	3,842,578	3,730,766	4,567,812	4,492,746	4,492	4,492	4,492	4,492
60.50*	60.50*	66.50*	66.50*	66.50*	66.5*	66.5*	66.5*	66.5*
SPECIAL FUND	80,675,658	80,494,715	81,105,493	81,111,328	81,111	81,111	81,111	81,111
59.30*	60.30*	43.30*	43.30*	43.30*	43.3*	43.3*	43.3*	43.3*
FEDERAL FUNDS	12,368,371	12,182,614	8,289,277	8,289,277	8,290	8,290	8,290	8,290
*	*	17.00*	17.00*	17.00*	17.0*	17.0*	17.0*	17.0*
OTHER FEDERAL FUNDS	*	2.00*	4,189,665	4,189,665	4,189	4,189	4,189	4,189
*	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	174	174	174
*	*	*	*	*	*	*	*	*
FEDERAL STIMULUS FUNDS								
70.20*	72.20*	76.20*	76.20*	76.20*	76.2*	76.2*	76.2*	76.2*
REVOLVING FUND	168,264,484	168,196,361	168,550,097	168,684,167	168,684	168,684	168,684	168,684
CAPITAL INVESTMENT APPROPRIATIONS								
CONSTRUCTION	35,226,000	35,226,000	24,096,000	24,096,000				
TOTAL CAPITAL APPROPRIATIONS	35,226,000	35,226,000	24,096,000	24,096,000				
BY MEANS OF FINANCING								
G.O. BONDS	5,872,000	5,872,000	4,025,000	4,025,000				
FEDERAL FUNDS	29,354,000	29,354,000	20,071,000	20,071,000				
TOTAL POSITIONS	241.00*	246.00*	259.00*	259.00*	259.00*	259.00*	259.00*	259.00*
TOTAL PROGRAM COST	300,377,091	300,004,910	290,972,798	291,037,637	266,940	266,940	266,940	266,940

**OPERATING AND CAPITAL APPROPRIATIONS**

REPORT P61-A

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

PROGRAM EXPENDITURES	IN DOLLARS				IN THOUSANDS			
	FY2011-12	FY2012-13	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19
<b>OPERATING COST</b>	<b>197.00*</b>	<b>201.00*</b>	<b>201.00*</b>	<b>201.00*</b>	<b>201.0*</b>	<b>201.0*</b>	<b>201.0*</b>	<b>201.0*</b>
PERSONAL SERVICES	13,197,836	13,038,270	13,431,532	13,771,110	13,771	13,771	13,771	13,771
OTHER CURRENT EXPENSES	243,796,503	243,792,503	243,690,176	243,538,993	243,538	243,538	243,538	243,538
EQUIPMENT	353,765	353,765	371,765	353,765	354	354	354	354
<b>TOTAL OPERATING COST</b>	<b>257,348,104</b>	<b>257,184,538</b>	<b>257,493,473</b>	<b>257,663,868</b>	<b>257,663</b>	<b>257,663</b>	<b>257,663</b>	<b>257,663</b>
<b>BY MEANS OF FINANCING</b>								
GENERAL FUND	36.00*	36.00*	37.00*	37.00*	37.0*	37.0*	37.0*	37.0*
SPECIAL FUND	2,604,474	2,522,059	2,640,964	2,671,454	2,671	2,671	2,671	2,671
FEDERAL FUNDS	60.00*	60.00*	66.00*	66.00*	66.0*	66.0*	66.0*	66.0*
OTHER FEDERAL FUNDS	80,627,387	80,446,444	81,057,222	81,063,057	81,063	81,063	81,063	81,063
INTERDEPT. TRANSFER	44.80*	46.80*	37.80*	37.80*	37.8*	37.8*	37.8*	37.8*
FEDERAL STIMULUS FUNDS	9,167,057	9,241,708	7,709,657	7,709,657	7,710	7,710	7,710	7,710
REVOLVING FUND	*	*	8.00*	8.00*	8.0*	8.0*	8.0*	8.0*
	*	2.00*	1,588,478	1,588,478	1,588	1,588	1,588	1,588
	*	174,454	174,454	174,454	174	174	174	174
	*	*	*	*	*	*	*	*
	56.20*	56.20*	50.20*	50.20*	50.2*	50.2*	50.2*	50.2*
	164,949,186	164,799,873	164,322,698	164,456,768	164,457	164,457	164,457	164,457
<b>CAPITAL INVESTMENT APPROPRIATIONS</b>								
CONSTRUCTION	35,226,000	35,226,000	24,096,000	24,096,000				
<b>TOTAL CAPITAL APPROPRIATIONS</b>	<b>35,226,000</b>	<b>35,226,000</b>	<b>24,096,000</b>	<b>24,096,000</b>				
<b>BY MEANS OF FINANCING</b>								
G.O. BONDS	5,872,000	5,872,000	4,025,000	4,025,000				
FEDERAL FUNDS	29,354,000	29,354,000	20,071,000	20,071,000				
<b>TOTAL POSITIONS</b>	<b>197.00*</b>	<b>201.00*</b>	<b>201.00*</b>	<b>201.00*</b>	<b>201.00*</b>	<b>201.00*</b>	<b>201.00*</b>	<b>201.00*</b>
<b>TOTAL PROGRAM COST</b>	<b>292,574,104</b>	<b>292,410,538</b>	<b>281,589,473</b>	<b>281,759,868</b>	<b>257,663</b>	<b>257,663</b>	<b>257,663</b>	<b>257,663</b>



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

	FY 2011-12	FY 2012-13	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19
<b>MEASURES OF EFFECTIVENESS</b>								
1. % COVERED SOURCES IN COMPL W/AIR RULES/PERMITS	89	92	92	92	92	92	92	92
2. % WASTEWTR EFFL/BIOSOLIDS REUSED FOR BENEF PURPS	17	17	17	17	17	17	17	17
3. % WASTEWATER DISCHARGERS IN COMPLIANCE W/PERMITS	95	96	96	96	96	96	96	96
4. % OF MARINE RECREATIONAL SITES IN COMPL WITH RULES	98	99	99	99	99	99	99	99
5. % PUBLIC DRINKING WATER SYS MEETING HEALTH STNDRS	99	94	94	94	94	94	94	94
6. % INJECTION WELL FACILITIES WITH A UIC PERMIT	57	57	57	57	57	57	57	57
7. % SOLID & HAZARDOUS WASTE FACILITIES IN COMPLIANCE	62	62	62	62	62	62	62	62
8. % UNDERGRND STORAGE TANK FACILITIES IN COMPLIANCE	90	90	90	90	90	90	90	90
9. PERCENT OF WASTEWATER REVOLVING FUNDS LOANED	95	96	96	96	96	96	96	96
10. % OF WASTEWATER SYSTEMS IN COMPLIANCE WITH RULES	90	90	82	82	82	82	82	82
<b>PROGRAM TARGET GROUPS</b>								
1. NUMBER OF COVERED AIR POLLUTION SOURCES	149	150	150	150	150	150	150	150
2. # EXSTG TRTMT WORKS PRODCNG RECLAIMD WTR/BIOSOLIDS	35	37	37	37	37	37	37	37
3. NUMBER OF MAJOR AND MINOR WASTEWATER DISCHARGERS	68	70	70	70	70	70	70	70
4. NUMBER OF MARINE RECREATIONAL SITES	147	147	147	147	147	147	147	147
5. NUMBER OF PUBLIC DRINKING WATER SYSTEMS	132	133	133	133	133	133	133	133
6. NUMBER OF UNDERGROUND INJECTION WELL FACILITIES	1343	1350	1350	1350	1350	1350	1350	1350
7. NUMBER OF SOLID AND HAZARDOUS WASTE FACILITIES	455	455	455	455	455	455	455	455
8. NO. UNDERGROUND STORAGE TANK FACILITIES REGISTERED	3210	3210	3210	3210	3210	3210	3210	3210
9. NUMBER OF WASTEWATER REVOLVING FUND LOANS MADE	4	11	11	11	11	11	11	11
10. # EXISTG TRTMT WKS & TRTMT INDIV WASTEWTR SYSTEMS	33914	33914	35700	36300	37500	31710	38700	39900
<b>PROGRAM ACTIVITIES</b>								
1. NO. INSPECTIONS OF COVERED AIR POLLUTION SOURCES	131	130	130	130	130	130	130	130
2. NO. OF INDIV WW SYS/BLDG PERMIT APPS REVWD/APPRVD	4097	4100	4200	4200	4200	4200	4200	4200
3. # OPER/MAINT/COMPLNT INSPECTNS OF WASTEWTR DISCHRS	281	300	300	300	300	300	300	300
4. # OF MICROBIOL/CHEM ANALYSES FOR MARINE WATER QUAL	5923	6200	6200	6200	6200	6200	6200	6200
5. # OF SANITARY SURVEYS CONDUCTED	28	36	36	36	36	36	36	36
6. NUMBER OF INJECTION WELL APPLICATIONS PROCESSED	72	72	72	72	72	72	72	72
7. # OF SOLID/HAZ WASTE FACIL INSPECTED/INVESTIGATED	100	100	100	100	100	100	100	100
8. NO. OF UNDERGRND STORAGE TANK FACIL EVAL/INSPECTED	500	500	500	500	500	500	500	500
9. NUMBER OF NEW CONSTRUCTION LOANS ISSUED	4	11	11	11	11	11	11	11
10. # OP/MAINT/CONST INSP/ENF ACT/INVTGTNS AT WW FAC	1535	1535	1535	1535	1535	1535	1535	1535
<b>PROGRAM REVENUES BY TYPE (IN THOUSANDS of DOLLARS)</b>								
LICENSES, PERMITS, AND FEES	189	168	168	168	168	168	168	168
REVENUES FROM THE USE OF MONEY AND PROPERTY	4,062	3,926	3,483	3,119	2,840	2,564	2,315	2,083
REVENUE FROM OTHER AGENCIES: FEDERAL	36,527	30,805	27,688	27,687	27,687	27,687	27,687	27,687
CHARGES FOR CURRENT SERVICES	64,499	64,183	63,612	63,148	62,822	62,441	62,163	61,900
FINES, FORFEITS AND PENALTIES	12	5	5	5	5	5	5	5
NON-REVENUE RECEIPTS	32,691	35,200	32,778	29,113	28,775	27,735	27,440	26,452
TOTAL PROGRAM REVENUES	137,980	134,287	127,734	123,240	122,297	120,600	119,778	118,295
<b>PROGRAM REVENUES BY FUND (IN THOUSANDS of DOLLARS)</b>								
GENERAL FUNDS	311	296	296	296	296	296	296	296
SPECIAL FUNDS	65,014	67,805	67,801	67,803	67,800	67,800	67,800	67,800
ALL OTHER FUNDS	72,655	66,186	59,637	55,141	54,201	52,504	51,682	50,199
TOTAL PROGRAM REVENUES	137,980	134,287	127,734	123,240	122,297	120,600	119,778	118,295

NOTE: PROGRAM REVENUES BY TYPE AND FUND MAY NOT BE ACCURATE DUE TO SYSTEMS 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. Transfer out one (1.00) Drinking Water Treatment Revolving Loan Fund position and funds from 840 FH Safe Drinking Water Branch to 849 FB Environmental Resources Office to align with acknowledged reorganization. (-1.00/-95,851W; -1.00/-95,851W)
2. Transfer out nine (9.00) Water Pollution Control Revolving Fund positions and funds from 840 FK Wastewater Branch to 849 FB Environmental Resources Office to align with acknowledged reorganization. (-9.00/-687,229W; -9.00/-687,229W)
3. Transfer out one (1.00) Environmental Health Specialist IV from 840 FF Clean Air Branch to 849 FD Hazard Evaluation and Emergency Response Office to align with the position's organizational location and function. (-1.00/69,825N; -1.00/69,825N)
4. Establish two (2.00) Environmental Health Specialist IV in 840 FG Clean Water Branch to improve statewide monitoring capacity. (2.00/72,508W; 2.00/133,016W)
5. Establish Engineer IV in 840 FK Wastewater Branch to expand water reuse program. (1.00/ 51,830W; 1.00/95,138W)
6. Establish one (1.00) Environmental Health Specialist IV in 840 FG Clean Water Branch to meet compliance and enforcement standards. (1.00/36,254W; 1.00/66,508W)
7. Establish one (1.00) Engineer IV in 840 FJ Solid and Hazardous Waste Branch to address backlog (10 sites) solid waste permitting and monitoring. (1.00/36,490A; 1.00/ 66,980A)
8. Establish two (2.00) Engineer (Env.) V's and convert one (1.00) temporary Engineer (Env.) V (#90505H) and one (1.00) temporary Program Health Specialist IV (#90505) to permanent (Greenhouse Gas) (4.00/357,327 B; 4.00/302,654 B)

9. Establish one (1.00) Environ Health Specialist IV in 840 FF to provide quality assurance oversight. (1.00/36,254 B; 1.00/66,508 B)
10. Establish one (1.00) Environ Health Specialist IV in 840 FF to provide additional air monitoring capacity(1.00/36,254 B; 1.00/66,508 B)
11. CIP request for Wastewater Treatment Revolving Fund for Pollution Control, Project No. 840141. (0.00/2,200,000C, 0.00/2.200,000C), (0.00/10,946,000N; 0.00/10,946,000N)
12. CIP request for Safe Drinking Water Revolving Fund, Statewide, Project No. 840142. (0.00/1,825,000C; 0.00/1,825,000C), (0.00/9,125,000N; 0.00/9,125,000N)

C. Description of Activities Performed

1. Technical Review: Evaluate the actual or potential for environmental pollution from natural and manmade 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 disasters and other emergency, particularly from terrorist acts against drinking water systems and from sewage spills.

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 of 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 is a surveillance, monitoring and enforcement program 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 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 of the environmental management programs is with the U.S. Environmental Protection Agency. At the State level, programs are coordinated with Department of Land and Natural Resources, Department of Transportation, Department of

Agriculture, the 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 the area of environmental protection, often without funding, and increasing federal efforts to delegate programs to the State have resulted in our inability to accomplish desired goals.

H. Discussion of Program Revenues

The major source of income for this program is Federal grants administered by the U.S. Environmental Protection Agency and funded pursuant to the Federal Water Pollution Control Act, Clean Air Act, the Resource Conservation and Recovery Act, and the Safe Drinking Water Act.

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			
	FY2011-12	FY2012-13	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19
OPERATING COST	5.00*	5.00*	5.00*	5.00*	5.0*	5.0*	5.0*	5.0*
PERSONAL SERVICES	294,485	287,187	294,485	294,485	294	294	294	294
OTHER CURRENT EXPENSES	50,003	50,003	200,003	50,003	50	50	50	50
<b>TOTAL OPERATING COST</b>	<b>344,488</b>	<b>337,190</b>	<b>494,488</b>	<b>344,488</b>	<b>344</b>	<b>344</b>	<b>344</b>	<b>344</b>
BY MEANS OF FINANCING								
GENERAL FUND	5.00*	5.00*	5.00*	5.00*	5.0*	5.0*	5.0*	5.0*
	344,488	337,190	494,488	344,488	344	344	344	344
TOTAL POSITIONS	5.00*	5.00*	5.00*	5.00*	5.00*	5.00*	5.00*	5.00*
TOTAL PROGRAM COST	344,488	337,190	494,488	344,488	344	344	344	344

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

	FY 2011-12	FY 2012-13	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19
<b>MEASURES OF EFFECTIVENESS</b>								
1. % OF ENV ASSMTS/EIS REVIEWED/PUBL IN OEQC BULLETIN	100	100	100	100	100	100	100	100
<b>PROGRAM TARGET GROUPS</b>								
1. HAWAII DEFACTO POPULATION	1309000	1309000	1309000	1309000	1309000	1309000	1309000	1309000
<b>PROGRAM ACTIVITIES</b>								
1. NO. OF POSN/POL ON ENVIRMTL ISSUES DEV FOR GOV/LEG	19	10	10	10	10	10	10	10
2. NO. ENV ISSUES ASSESSMNTS/IMPACT STATEMNTS REVIEWED	192	200	150	150	150	150	150	150
3. NO. ENVRNMNTL EDUC PROJECTS & WORKSHOPS CONDUCTED	13	10	10	10	10	10	10	10

NOTE: PROGRAM REVENUES BY TYPE AND FUND MAY NOT BE ACCURATE DUE TO SYSTEMS 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)

Funds to support the design, development, and implementation of a new Office of Environmental Quality Control (OEQC) Information Management System that will support an enhanced ability to store, access and search for information and documents by the OEQC, partner agencies, and the public.(0.00/150,000A;0.00/0)

C. Description of Activities Performed

Program objectives include implementation of Ch. 341, 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 Ch. 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. 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, 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 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 OEQC's guidance and coordination, and when requested by the Governor, direction by OEQC.

F. Description of Major External Trends Affecting the Program

External trends, which affect this program are recent court cases that reaffirmed the requirements of Ch. 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 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			
	FY2011-12	FY2012-13	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19
OPERATING COST	39.00*	40.00*	53.00*	53.00*	53.0*	53.0*	53.0*	53.0*
PERSONAL SERVICES	3,548,638	3,339,321	4,277,277	4,325,721	4,325	4,325	4,325	4,325
OTHER CURRENT EXPENSES	3,904,861	3,908,861	4,598,560	4,598,560	4,599	4,599	4,599	4,599
EQUIPMENT	5,000	9,000	13,000	9,000	9	9	9	9
<b>TOTAL OPERATING COST</b>	<b>7,458,499</b>	<b>7,257,182</b>	<b>8,888,837</b>	<b>8,933,281</b>	<b>8,933</b>	<b>8,933</b>	<b>8,933</b>	<b>8,933</b>
BY MEANS OF FINANCING	10.00*	10.00*	12.00*	12.00*	12.0*	12.0*	12.0*	12.0*
GENERAL FUND	893,616	871,517	1,432,360	1,476,804	1,477	1,477	1,477	1,477
SPECIAL FUND	.50*	.50*	.50*	.50*	.5*	.5*	.5*	.5*
48,271	48,271	48,271	48,271	48,271	48	48	48	48
14.50*	13.50*	5.50*	5.50*	5.50*	5.5*	5.5*	5.5*	5.5*
FEDERAL FUNDS	3,201,314	2,940,906	579,620	579,620	580	580	580	580
*	*	9.00*	9.00*	9.00*	9.0*	9.0*	9.0*	9.0*
OTHER FEDERAL FUNDS			2,601,187	2,601,187	2,601	2,601	2,601	2,601
FEDERAL STIMULUS FUNDS								
14.00*	16.00*	26.00*	26.00*	26.00*	26.0*	26.0*	26.0*	26.0*
REVOLVING FUND	3,315,298	3,396,488	4,227,399	4,227,399	4,227	4,227	4,227	4,227
TOTAL POSITIONS	39.00*	40.00*	53.00*	53.00*	53.00*	53.00*	53.00*	53.00*
TOTAL PROGRAM COST	7,458,499	7,257,182	8,888,837	8,933,281	8,933	8,933	8,933	8,933



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

	FY 2011-12	FY 2012-13	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19
<b>MEASURES OF EFFECTIVENESS</b>								
1. % OIL/CHEM/HAZ SPILL RESPONSES/CLEANUPS INVESTGTD	4	17	17	17	17	17	17	17
2. PERCENT OF COMPLETE CHEMICAL INVENTORIES REPORTED	98	100	100	100	100	100	100	100
3. PERCENT OF TARGET GROUP THAT HAS BEEN ASSISTED	24	10	10	10	10	10	10	10
<b>PROGRAM TARGET GROUPS</b>								
1. NUMBER OF OIL/CHEMICAL/HAZARDOUS MATERIAL SPILLS	302	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
<b>PROGRAM ACTIVITIES</b>								
1. NO. OIL/CHEM/HAZARD MATERIAL SPILLS INVESTIGATED	12	57	57	57	57	57	57	57
2. NO. OF FACIL REPRTRNG COMPLETE CHEMICAL INVENTORIES	878	979	979	979	979	979	979	979
3. # INVESTIG/RESPONSES TO RPTS OF ENV ILLNESS/INJURY	24269	15504	15504	15504	15504	15504	15504	15504
<b>PROGRAM REVENUES BY TYPE (IN THOUSANDS of DOLLARS)</b>								
TAXES	1,315	1,340	1,340	1,340	1,340	1,340	1,340	1,340
REVENUE FROM OTHER AGENCIES: FEDERAL	1,778	1,950	1,950	1,750	1,750	1,750	1,750	1,750
CHARGES FOR CURRENT SERVICES	84	77	77	77	77	77	77	77
FINES, FORFEITS AND PENALTIES	764	585	585	585	585	585	585	585
TOTAL PROGRAM REVENUES	3,941	3,952	3,952	3,752	3,752	3,752	3,752	3,752
<b>PROGRAM REVENUES BY FUND (IN THOUSANDS of DOLLARS)</b>								
SPECIAL FUNDS	1,778	1,950	1,950	1,750	1,750	1,750	1,750	1,750
ALL OTHER FUNDS	2,163	2,002	2,002	2,002	2,002	2,002	2,002	2,002
TOTAL PROGRAM REVENUES	3,941	3,952	3,952	3,752	3,752	3,752	3,752	3,752

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

A. Statement of Program Objective

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. Transfer one (1.00) Drinking Water Treatment Revolving Loan Fund position and funds from Safe Drinking Water Branch to Environmental Resources Office HTH 849 FB, for appropriate oversight of loan management functions, and to align with reorganization that was acknowledged on 6/20/12. (1.00/95,851 W; 1.00/95,851 W)
2. Transfer nine (9.00) Water Pollution Control and Drinking Water Treatment revolving loan funds fiscal and administrative positions and funds from Wastewater Branch to Environmental Resources Office HTH 849 FB, for appropriate oversight of loan management functions, and to align with reorganization that was acknowledged on 6/20/12. (9.00/687,229 W; 9.00/687,229 W).
3. Funding for building costs, including utilities charges, being assessed by DAGS for all the EHA tenants of the AAFES Building. (0.00/350,000 A; 0.00/350,000 A)
4. Establish one (1.00) Information Technology Specialist and provide funding in HTH 849 FA to manage, coordinate, and sustain all new and ongoing information technology activities for Environmental Health. (1.00/161,956 A; 1.00/185,612 A)
5. Establish one (1.00) permanent Planner IV in HTH 849 FB to coordinate land use reviews for EHA programs. (1.00/26,788 A; 1.00/47,576 A)
6. Increase federal ceiling for new federal Hazardous Materials Emergency Preparedness Grant. The HEER Office is taking over from State Civil Defense as the annual recipient of this grant from the U.S. Dept. of Transportation. (0.00/112,704 P; 0.00/112,704 P)

C. Description of Activities Performed

The major activities in this program are:

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 Environmental Health Administration.
3. Hazard Evaluation & 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 Environmental Health Administration

D. Statement of Key Policies Pursued

Environmental Health Administration policies are discussed in the Department's Environmental Management, HTH 840, and Environmental Health Services, HTH 610. In addition to the above, Environmental Health Administration 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, Region 9, which provides guidelines and funding for fourteen major programs. 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 of 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 has 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. Another source of income is from various environmental activities, fines, cost recovery, special charges, etc., that are placed into the Environmental Response Revolving Fund.

**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			
	FY2011-12	FY2012-13	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19
CURRENT LEASE PAYMENTS OTHER CURRENT EXPENSES	12,627,796	12,500,796	14,381,000	11,520,000	11,520	11,520	11,520	11,520
TOTAL CURRENT LEASE PAYMENTS C	12,627,796	12,500,796	14,381,000	11,520,000	11,520	11,520	11,520	11,520
BY MEANS OF FINANCING								
GENERAL FUND	6,796	6,796						
SPECIAL FUND	12,621,000	12,494,000	14,381,000	11,520,000	11,520	11,520	11,520	11,520
OPERATING COST	5,158.67*	5,172.67*	5,197.67*	5,201.67*	5,201.8*	5,201.8*	5,201.8*	5,201.8*
PERSONAL SERVICES	494,115,670	543,434,833	536,305,803	547,618,000	547,620	547,620	547,620	547,620
OTHER CURRENT EXPENSES	641,219,878	668,344,509	691,651,855	688,011,330	688,010	688,010	688,010	688,010
EQUIPMENT	1,342,439	1,284,886	1,670,076	1,501,676	1,501	1,501	1,501	1,501
MOTOR VEHICLE	55,000							
TOTAL OPERATING COST	1,136,732,987	1,213,064,228	1,229,627,734	1,237,131,006	1,237,131	1,237,131	1,237,131	1,237,131
BY MEANS OF FINANCING								
GENERAL FUND	1,955.12*	1,954.12*	1,990.12*	1,991.12*	1,991.2*	1,991.2*	1,991.2*	1,991.2*
	455,234,960	468,958,348	488,844,441	487,785,418	487,786	487,786	487,786	487,786
	2,916.75*	2,920.75*	2,934.25*	2,937.25*	2,937.3*	2,937.3*	2,937.3*	2,937.3*
SPECIAL FUND	577,439,021	623,798,753	628,962,329	637,524,624	637,524	637,524	637,524	637,524
	285.30*	296.30*	217.90*	217.90*	217.9*	217.9*	217.9*	217.9*
FEDERAL FUNDS	100,958,534	114,412,867	72,707,229	72,707,229	72,709	72,709	72,709	72,709
	*	*	54.40*	54.40*	54.4*	54.4*	54.4*	54.4*
OTHER FEDERAL FUNDS			34,868,334	34,868,334	34,867	34,867	34,867	34,867
INTERDEPT. TRANSFER	1.50*	1.50*	1.00*	1.00*	1.0*	1.0*	1.0*	1.0*
FEDERAL STIMULUS FUNDS	3,100,472	5,894,260	4,245,401	4,245,401	4,245	4,245	4,245	4,245
CAPITAL INVESTMENT APPROPRIATIONS								
PLANS	6,000	1,058,000	4,802,000	500,000				
LAND ACQUISITION	1,000	383,000						
DESIGN	4,964,000	1,848,000	2,608,000	3,066,000				
CONSTRUCTION	53,520,000	57,840,000	23,545,000	32,405,000	4,650			
EQUIPMENT	7,353,000	10,101,000	22,943,000	14,029,000				

OPERATING AND CAPITAL APPROPRIATIONS

REPORT P61-A

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

PROGRAM EXPENDITURES	--IN DOLLARS--				--IN THOUSANDS--			
	FY2011-12	FY2012-13	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19
TOTAL CAPITAL APPROPRIATIONS	65,844,000	71,230,000	53,898,000	50,000,000	4,650			
BY MEANS OF FINANCING								
G.O. BONDS	65,844,000	71,230,000	53,898,000	50,000,000	4,650			
TOTAL POSITIONS	5,158.67*	5,172.67*	5,197.67*	5,201.67*	5,201.80*	5,201.80*	5,201.80*	5,201.80*
TOTAL PROGRAM COST	1,215,204,783	1,296,795,024	1,297,906,734	1,298,651,006	1,253,301	1,248,651	1,248,651	1,248,651

OPERATING AND CAPITAL APPROPRIATIONS

REPORT P61-A

PROGRAM ID: **HTH100**  
 PROGRAM STRUCTURE NO. **05010101**  
 PROGRAM TITLE: **COMMUNICABLE DISEASE SERVICES**

PROGRAM EXPENDITURES	IN DOLLARS				IN THOUSANDS			
	FY2011-12	FY2012-13	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19
OPERATING COST	114.00*	115.00*	267.87*	267.87*	267.9*	267.9*	267.9*	267.9*
PERSONAL SERVICES	9,536,796	9,168,384	20,333,880	20,333,880	20,334	20,334	20,334	20,334
OTHER CURRENT EXPENSES	12,259,381	12,099,381	12,701,856	12,701,856	12,701	12,701	12,701	12,701
TOTAL OPERATING COST	21,796,177	21,267,765	33,035,736	33,035,736	33,035	33,035	33,035	33,035
BY MEANS OF FINANCING								
GENERAL FUND	98.00*	99.00*	251.87*	251.87*	251.9*	251.9*	251.9*	251.9*
SPECIAL FUND	13,388,725	12,986,091	24,396,794	24,396,794	24,396	24,396	24,396	24,396
FEDERAL FUNDS	16.00*	16.00*	*	*	*	*	*	*
OTHER FEDERAL FUNDS	8,407,452	8,281,674	3,770,671	3,770,671	3,772	3,772	3,772	3,772
INTERDEPT. TRANSFER	*	*	16.00*	16.00*	16.0*	16.0*	16.0*	16.0*
G.O. BONDS	*	*	4,645,805	4,645,805	4,645	4,645	4,645	4,645
DESIGN			131,746	131,746	132	132	132	132
CONSTRUCTION								
TOTAL CAPITAL APPROPRIATIONS		930,000						
TOTAL POSITIONS	114.00*	115.00*	267.87*	267.87*	267.90*	267.90*	267.90*	267.90*
TOTAL PROGRAM COST	21,796,177	22,197,765	33,035,736	33,035,736	33,035	33,035	33,035	33,035

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

	FY 2011-12	FY 2012-13	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19
<b>MEASURES OF EFFECTIVENESS</b>								
1. NEW ACTIVE TB CASE RATE PER 100,000 RESIDENTS	8.8	8.9	9	9	9	9	9	9
2. ACTIVE TB CASES - PROPORTN COMPL RECOM THERAPY (%)	93	96	96	96	96	96	96	96
3. LATENT TB CASES - PROPRTRN COMPL RECOM THERAPY (%)	58	59	59	59	59	59	59	59
4. CHLAMYDIA CASE RATE PER 100,000	475	464	500	500	500	500	500	500
5. GONORRHEA CASE RATE PER 100,000	52	53	55	55	55	55	55	55
6. NEWLY REPORTED HIV CASES PER 100,000	15	8.7	8.5	8.5	8.5	8.5	8.5	8.5
7. NEWLY DIAGNOSED HANSEN'S DISEASE CASES PER 100,000	1.4	1.5	1.5	1.5	1.5	1.5	1.5	1.5
8. % OUTPATIENTS W/NEW COMPLICATNS FROM HANSEN'S DIS	0.75	1	1	1	1	1	1	1
9. ANNL KALAUPAPA REGISTRY PATIENT CARE/RESIDENT DAYS	3087	2650	2650	2650	2650	2650	2650	2650
10. % CLIENTS WITH PLAN AFTER SELF-MANAGEMENT TRNG	0	0	80	85	87	88	89	90
<b>PROGRAM TARGET GROUPS</b>								
1. RESIDENT POPULATION, STATE OF HAWAII (IN THOUS)	1295	1363	1363	1363	1363	1363	1363	1363
2. CONTACTS OF INFECTIOUS TB CASES	1000	676	750	750	750	750	750	750
3. CLASS B IMMIGRANTS	4000	757	800	800	800	800	800	800
4. WOMEN 18-25 YEARS OF AGE	55000	70048	70000	70000	70000	70000	70000	70000
5. CONTACTS OF CHLAMYDIA CASES FROM DOH'S STD CLINIC	500	100	100	100	100	100	100	100
6. CONTACTS OF HIV CASES FRM DOH'S HIV COUNSLNG/TSTNG	40	8	40	40	40	40	40	40
7. PATIENTS ON THE KALAUPAPA REGISTRY	17	17	17	17	16	16	16	15
8. CONTACTS OF HANSEN'S DISEASE CASES	1054	1040	1040	1040	1040	1040	1040	1040
9. OUTPATIENTS W/ HANSEN'S DISEASE-RELATED DISABILI	109	100	100	100	100	100	100	100
10. VULNERABLE INDIVIDUALS BENEFITED BY SELF-MNGT TRG	0	0	400	1000	1500	2000	2500	3000
<b>PROGRAM ACTIVITIES</b>								
1. NO. OF INDIVIDUALS RECVNG COUNSELNG/EVAL/SCREENING	69908	92110	93810	93810	93810	93810	93810	93810
2. NO. INDIV RECVNG EVAL FOR SUSPCTD EXP TO COMM DIS	3083	3670	3670	3670	3670	3670	3670	3670
3. NO. OF INDIV RECVNG TREATMNT FOR COMM DISEASE	2939	2575	2775	2775	2775	2775	2775	2775
4. NO. OUTPATNT VISTS/EVAL BY PHYS/NURSES/SW/PARAMED	20092	20300	20500	20500	20500	20500	20500	20500
5. NO. OF LABORATORY TESTS OBTAINED AND REVIEWED	10038	11275	11675	11675	11675	11675	11675	11675
6. NO. OF WOMEN, 18-25, SCREENED FOR CHLAMYDIA	8700	5812	5000	5000	5000	5000	5000	5000
7. NO. PATIENTS PROVIDD HIV-RELATD DRUG TREATMNT ASST	325	403	410	410	410	410	410	410
8. NO. OF HIV DRUG TREATMENT PRESCRIPTIONS FILLED	8600	10728	11000	11000	11000	11000	11000	11000
9. NO. OF STERILE SYRINGES EXCHANGED	520000	601741	600000	600000	600000	600000	600000	600000
10. # VULNERABLE INDIVIDUALS RECEIVING SELF-MNGMT TRNG	0	0	16	15	14	13	12	11
<b>PROGRAM REVENUES BY TYPE (IN THOUSANDS of DOLLARS)</b>								
REVENUE FROM OTHER AGENCIES: FEDERAL	7,592	8,092	8,092	8,092	8,092	8,092	8,092	8,092
CHARGES FOR CURRENT SERVICES	22	22	22	22	22	22	22	22
NON-REVENUE RECEIPTS	141	140	140	140	140	140	140	140
TOTAL PROGRAM REVENUES	7,755	8,254	8,254	8,254	8,254	8,254	8,254	8,254
<b>PROGRAM REVENUES BY FUND (IN THOUSANDS of DOLLARS)</b>								
GENERAL FUNDS	163	162	162	162	162	162	162	162
SPECIAL FUNDS	7,592	8,092	8,092	8,092	8,092	8,092	8,092	8,092
TOTAL PROGRAM REVENUES	7,755	8,254	8,254	8,254	8,254	8,254	8,254	8,254

NOTE: PROGRAM REVENUES BY TYPE AND FUND MAY NOT BE ACCURATE DUE TO SYSTEMS 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) 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 lifestyles choices and assuring access to health care services through Public Health Nursing and School Health Services, with the incorporation of the Public Health Nursing Branch (PHNB).

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

1. Transfer-in PHNB from HTH 141/KJ, General Medical & Preventive Services Division (GMPSD) into HTH 100/KJ, Communicable Disease Division (CDD) as part of the abolishment of HTH 141, GMPSD (148.00/10,765,701A, 90,720B, 131,746U; 148.00/ 10,765,701A, 90,720B, 131,746U).
2. Transfer-in School Health Services from HTH 141/KL, GMPSD into HTH 100/KL, CDD as part of the abolishment of HTH 141, GMPSD (2.87/203,193A; 2.87/203,193A).
3. Transfer-in positions (PHAO VI and PMS IV) and funding from HTH 141/EE, Dental Health Administration into HTH 100 (org code KE-CDD Administration), as part of the abolishment of HTH 141/GMPSD (2.00/168,175A; 2.00/168,175A).
4. Add funds for utilities for four health centers which PHNB has offices (0.00/71,000A; 0.00/71,000A).

C. Description of Activities Performed

TB Control Branch (TB Control Branch) – Coordinate and provide screening for active TB disease and latent TB infection using skin test, blood tests and X-rays. PHNs, MDs, pharmacists, and outreach workers evaluate, treat, and monitor patient compliance with treatment protocols, as well as trace and manage contacts of active TB cases. "TB Case Review", "TB Cohort Review" and other program evaluation tools provide comprehensive program evaluation and direction, and facilitate collection of relevant data for surveillance, statistical reporting and analysis of trends.

Hansen's Disease Branch (HD 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 as long as they choose to stay there. "Hale Mohalu Hospital" on Oahu permits a higher level of medical care for the Kalaupapa patients than can be provided at the Kalaupapa nursing facility. Patients are also triaged or re-admitted to the Hale Mohalu health care facility on their way to tertiary care in the community hospitals, thus providing greater continuity of care.

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 and screen those who are most at risk. The STD Clinic, located at Diamond Head Health Center, offers free examination, treatment, counseling, and health education services. The Gonorrhea/Chlamydia Screening Program is a statewide screening program to reduce the reservoir of infection in asymptotically affected women who can transmit infection and who may have delayed sequelae from their infection. The screening program also provides health care providers with the necessary materials, delivery system, and laboratory support to screen high-risk women for gonorrhea/chlamydia. STD and HIV surveillance data enables the program to monitor disease transmission and to target



resources more efficiently and effectively. The SAPB also coordinates and participates in a program for anonymous HIV testing that includes pre- and post-test counseling provided by trained HIV counselors/testers in community clinics throughout the State. HIV/AIDS medical care and services are supported through case management in conjunction with community partners. Individuals with HIV/AIDS are provided initial medical and laboratory services. HIV medications are provided for residents with HIV who are unable to access them through other sources. The SAPB also administers a program that continues group health insurance coverage for patients who meet specific program criteria and who leave employment due to symptomatic HIV infection.

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 provide the department's nursing resources and response for 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. The HD Branch operates to limit and control Hansen's disease in accordance with HRS Chapter 326 and Hawaii Administrative Rules Title 11 Chapter 168. The Kalaupapa program operates in accordance with HRS 326-40, which mandates the provision of medical care and the maintenance of their Kalaupapa home for long-term Hansen's disease patients disabled from effects of the disease and lifelong institutionalization. Kalaupapa was established as a National

Historical Park in December 1980 by Public Law 96-565 to operate, preserve, and protect Kalaupapa as a National Park. The PHNB operates collaboratively to provide culturally competent and relevant public health nursing services to at-risk and vulnerable populations as well as community support during emergency events in accordance with HRS Chapter 321-1.7. The SAPB operates in accordance with Hawaii State Plan, Part I Sec 20(b)(1), (3), (4); Part I Sec 20 (b) (3); and Part I Sec (b) (4). Surveillance for the entire division operates through Hawaii Administrative Rules Title 11 Chapter 156.

E. Identification of Important Program Relationships

CDD 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 US 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. This reimbursement has decreased over the last fifteen years to approximately \$1.9 million currently. 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. Hawaii's TB and HD case rates are most influenced 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. The aging of Kalaupapa patients poses significant challenges with increasing infirmities and limitations adding to the progressive disabilities caused by prior Hansen's disease infection. As general medical and infrastructure costs increase in Hawaii, the costs for this geriatric population increase significantly. The decreasing patient population has prompted a review of the appropriate level of medical care provided in the HD Branch's two health care facilities.

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

In FB 11-13, the budget will at best maintain services at the current level without change to program size and effectiveness. 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

The CDD plans no significant changes in the budget and planning period, thus, 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. The operation is not only costly but it is also difficult to attract and recruit qualified personnel to staff the program. 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. It is the policy of the State that any patient resident of Kalaupapa desiring to remain at the Settlement, shall be permitted to do so.

**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-----			
	FY2011-12	FY2012-13	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19
OPERATING COST	55.00*	52.00*	52.00*	52.00*	52.0*	52.0*	52.0*	52.0*
PERSONAL SERVICES	7,376,558	6,609,225	7,109,998	7,135,654	7,135	7,135	7,135	7,135
OTHER CURRENT EXPENSES	3,884,772	3,948,081	6,163,077	6,163,077	6,163	6,163	6,163	6,163
EQUIPMENT	826,118	826,118	828,318	828,318	828	828	828	828
<b>TOTAL OPERATING COST</b>	<b>12,087,448</b>	<b>11,383,424</b>	<b>14,101,393</b>	<b>14,127,049</b>	<b>14,126</b>	<b>14,126</b>	<b>14,126</b>	<b>14,126</b>
BY MEANS OF FINANCING	20.60*	20.60*	20.60*	20.60*	20.6*	20.6*	20.6*	20.6*
GENERAL FUND	1,613,768	1,578,391	1,764,424	1,790,080	1,790	1,790	1,790	1,790
	34.40*	31.40*	31.40*	31.40*	31.4*	31.4*	31.4*	31.4*
FEDERAL FUNDS	10,473,680	9,805,033	11,193,278	11,193,278	11,193	11,193	11,193	11,193
	*	*	*	*	*	*	*	*
OTHER FEDERAL FUNDS			1,143,691	1,143,691	1,143	1,143	1,143	1,143
TOTAL POSITIONS	55.00*	52.00*	52.00*	52.00*	52.00*	52.00*	52.00*	52.00*
<b>TOTAL PROGRAM COST</b>	<b>12,087,448</b>	<b>11,383,424</b>	<b>14,101,393</b>	<b>14,127,049</b>	<b>14,126</b>	<b>14,126</b>	<b>14,126</b>	<b>14,126</b>

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

	FY 2011-12	FY 2012-13	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19
<b>MEASURES OF EFFECTIVENESS</b>								
1. % ENTEROHEMORRHAGIC E. COLI, HEPATITIS A, REPORTED	100	10	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	99	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	36	45	55	65	75	85	85	85
<b>PROGRAM TARGET GROUPS</b>								
1. TOTAL # HAWAII RESIDENTS (1000'S)	1374	1300	1300	1300	1300	1300	1300	1300
2. TOTAL # VISITORS TO HAWAII (1000'S)	7299	6768	6768	6768	6768	6768	6768	6768
3. TOTAL # CHILDREN AGE FIVE YEARS (1000'S)	19	18	18	18	18	18	18	18
4. TOTAL # OF ADOLESCENTS (1000'S)	220	230	230	230	230	230	230	230
5. NUMBER OF BIRTHS EXCLUDING MILITARY (100'S)	160	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	103	103	103	103	103	103	103	103
<b>PROGRAM ACTIVITIES</b>								
1. # HI RESIDENTS ENTERED, MAINTAINED IN IMM REGISTRY	467690	567690	667690	767690	867690	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	4755	4755	4755	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
<b>PROGRAM REVENUES BY TYPE (IN THOUSANDS of DOLLARS)</b>								
REVENUE FROM OTHER AGENCIES: FEDERAL	11,617	10,979	10,604	10,604	10,603	10,603	10,603	10,603
NON-REVENUE RECEIPTS	27	33						
TOTAL PROGRAM REVENUES	11,644	11,012	10,604	10,604	10,603	10,603	10,603	10,603
<b>PROGRAM REVENUES BY FUND (IN THOUSANDS of DOLLARS)</b>								
SPECIAL FUNDS	11,305	10,979	10,604	10,604	10,603	10,603	10,603	10,603
ALL OTHER FUNDS	339	33						
TOTAL PROGRAM REVENUES	11,644	11,012	10,604	10,604	10,603	10,603	10,603	10,603

NOTE: PROGRAM REVENUES BY TYPE AND FUND MAY NOT BE ACCURATE DUE TO SYSTEMS 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. Transfer one temporary position & funds for Hospital Preparedness Program from HTH 730/MQ Emergency Medical Services Program to better align programmatic needs and functions (0.00/2,086,836N; 0.00/2,086,836N).
2. Transfer one temporary position & funds for Emergency System for Advance Registration of Volunteer Health Professionals grant from HTH 730/MQ Emergency Medical Services Program to better align programmatic needs and functions (0.00/ 186,204P; 0.00/ 186,204P).
3. Funding for one temporary position and software maintenance for the Electronic Disease Surveillance & Electronic Health Records Systems to detect, respond to disease outbreaks (0.00/150,656; 0.00/176,312A).

C. Description of Activities Performed

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 ~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 13-15 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 in recent years.

J. Further Considerations

None.

OPERATING AND CAPITAL APPROPRIATIONS

REPORT P61-A

PROGRAM ID: **HTH141**  
 PROGRAM STRUCTURE NO. **050102**  
 PROGRAM TITLE: **GENERAL MEDICAL AND PREVENTIVE SERVICES**

PROGRAM EXPENDITURES	IN DOLLARS				IN THOUSANDS			
	FY2011-12	FY2012-13	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19
OPERATING COST	166.87*	164.87*	*	*	*	*	*	*
PERSONAL SERVICES	9,845,000	11,677,967						
OTHER CURRENT EXPENSES	716,776	843,550						
<b>TOTAL OPERATING COST</b>	<b>10,561,776</b>	<b>12,521,517</b>						
BY MEANS OF FINANCING								
GENERAL FUND	166.87*	164.87*	*	*	*	*	*	*
SPECIAL FUND	10,435,827	12,299,051						
INTERDEPT. TRANSFER	2,986	90,720	*	*	*	*	*	*
TOTAL POSITIONS	122,963	131,746						
<b>TOTAL PROGRAM COST</b>	<b>10,561,776</b>	<b>12,521,517</b>						

**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			
	FY2011-12	FY2012-13	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19
OPERATING COST	10.00*	16.00*	16.00*	16.00*	16.0*	16.0*	16.0*	16.0*
PERSONAL SERVICES	1,646,408	1,978,166	1,681,040	1,720,318	1,721	1,721	1,721	1,721
OTHER CURRENT EXPENSES	74,560,350	77,533,742	76,775,304	81,819,137	81,819	81,819	81,819	81,819
EQUIPMENT	62,169	219,568	217,368	217,368	217	217	217	217
<b>TOTAL OPERATING COST</b>	<b>76,268,927</b>	<b>79,731,476</b>	<b>78,673,712</b>	<b>83,756,823</b>	<b>83,757</b>	<b>83,757</b>	<b>83,757</b>	<b>83,757</b>
BY MEANS OF FINANCING	10.00*	13.00*	13.00*	13.00*	13.0*	13.0*	13.0*	13.0*
GENERAL FUND	55,702,583	55,864,040	57,191,251	56,891,251	56,891	56,891	56,891	56,891
SPECIAL FUND	18,064,371	20,063,956	20,411,219	25,794,330	25,794	25,794	25,794	25,794
FEDERAL FUNDS	2,501,973	3,803,480	10,563	10,563	11	11	11	11
OTHER FEDERAL FUNDS	*	*	1,060,679	1,060,679	1,061	1,061	1,061	1,061
<b>TOTAL POSITIONS</b>	<b>10.00*</b>	<b>16.00*</b>	<b>16.00*</b>	<b>16.00*</b>	<b>16.00*</b>	<b>16.00*</b>	<b>16.00*</b>	<b>16.00*</b>
<b>TOTAL PROGRAM COST</b>	<b>76,268,927</b>	<b>79,731,476</b>	<b>78,673,712</b>	<b>83,756,823</b>	<b>83,757</b>	<b>83,757</b>	<b>83,757</b>	<b>83,757</b>



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

	FY 2011-12	FY 2012-13	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19
<b>MEASURES OF EFFECTIVENESS</b>								
1. % RESPONSES MEETING RESPONSE TIME STD - OAHU	90	90	90	90	90	90	90	90
2. % RESPONSES MEETING RESPONSE TIME STD - KAUAI	95	90	90	90	90	90	90	90
3. % RESPONSES MEETING RESPONSE TIME STD - HAWAII	88	90	90	90	90	90	90	90
4. % RESPONSES MEETING RESPONSE TIME STD - MAUI	92	90	90	90	90	90	90	90
5. % INCR IN COMM COAL/PARTN INITIATD & SPPT INJ PREV	11	3	3	0	0	0	0	0
6. % INCR IN NO. OF PERSONS TRAINED IN INJ PREVENTION	71	200	7	0	0	0	0	0
7. PERCENT OF AGE-APPROPRIATE SEAT USE STATEWIDE	91	91	92	92	92	92	92	92
<b>PROGRAM TARGET GROUPS</b>								
1. GENERAL DE FACTO POPULATION (THOUSANDS)	1487	1487	1487	1487	1487	1487	1487	1487
2. NUMBER OF HIGH RISK CARDIAC CASES	4538	4538	4538	4538	4538	4538	4538	4538
3. NUMBER OF HIGH RISK TRAUMA CASES	6672	6672	6672	6672	6672	6672	6672	6672
4. NUMBER OF HIGH RISK PEDIATRIC CASES	1851	1851	1851	1851	1851	1851	1851	1851
5. NUMBER OF CARDIOPULMONARY ARREST CASES	1214	1214	1214	1214	1214	1214	1214	1214
6. NO. OF LICENSED GROUND AMBULANCE SERVICE PROVIDERS	8	8	8	8	8	8	8	8
7. NO. OF LICENSED AIR AMBULANCE SERVICE PROVIDERS	5	5	5	5	5	5	5	5
8. NO. OF YOUTHS UNDER 24 AND SENIORS 65 YRS & OLDER	619042	619042	619042	619042	619042	619042	619042	619042
<b>PROGRAM ACTIVITIES</b>								
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)	520	520	520	520	520	520	520	520
4. NUMBER OF RESPONSES TO EMERGENCY AMBULANCE CALLS	118228	118228	118228	118228	118228	118228	118228	118228
5. NO. OF PATIENTS BILLED FOR EMERGENCY AMBULANCE SVC	72469	72469	72469	72469	72469	72469	72469	72469
6. PERCENTAGE OF AMBULANCE SERVICE REVENUES COLLECTED	86.2	91	91	91	91	91	91	91
7. ADM/MAINT EMS QUAL ASSUR & QUAL IMPRV PRG (ST-DYS)	312	312	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	1397	1500	1600	1600	1600	1600	1600	1600
10. # COMM COAL/TSKFRC/PRTNRSHIP INIT/SUPPT IN INJ PREV	31	31	32	32	32	32	32	32
<b>PROGRAM REVENUES BY TYPE (IN THOUSANDS of DOLLARS)</b>								
TAXES	15,712	15,712	28,329	28,329	28,319	28,319	28,319	28,319
REVENUES FROM THE USE OF MONEY AND PROPERTY	182							
REVENUE FROM OTHER AGENCIES: FEDERAL	2,479	578	578	578	578	428	428	428
CHARGES FOR CURRENT SERVICES	32,156	32,156	32,156	32,156	32,155	32,155	32,155	32,155
FINES, FORFEITS AND PENALTIES	53							
NON-REVENUE RECEIPTS	707	672	672	672	672	672	672	672
TOTAL PROGRAM REVENUES	51,289	49,118	61,735	61,735	61,724	61,574	61,574	61,574
<b>PROGRAM REVENUES BY FUND (IN THOUSANDS of DOLLARS)</b>								
GENERAL FUNDS	32,156	32,156	32,156	32,156	32,155	32,155	32,155	32,155
SPECIAL FUNDS	18,426	16,290	28,907	28,907	28,897	28,747	28,747	28,747
ALL OTHER FUNDS	707	672	672	672	672	672	672	672
TOTAL PROGRAM REVENUES	51,289	49,118	61,735	61,735	61,724	61,574	61,574	61,574

NOTE: PROGRAM REVENUES BY TYPE AND FUND MAY NOT BE ACCURATE DUE TO SYSTEMS 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. Transfer out temporary position and funds for Hospital Preparedness Program (HPP) from Emergency Medical Services (HTH 730/MQ) to Disease Outbreak Control Division (HTH 131/DB) (-0.00/-2,086,836 N; -0.00/-2,086,836 N).
2. Transfer out ESAR-VHP Grant Program from Emergency Medical Services (HTH 730/MQ) to Disease Outbreak Control Division (HTH 131/DB) (-0.00/-186,204 P; -0.00/-186,204 P).
3. Add funds to emergency ambulance service contracts (HTH 730/MQ) (0.00/1,300,000 A; 0.00/1,000,000 A).
4. Establish temporary Public Health Educator IV, #94600H (HTH 730/MT) (0.00/39,277 B; 0.00/78,555 B).
5. Increase Ceiling of the Trauma System Special Fund (HTH 730/MQ) (0.00/0 B; 0.00/5,343,833 B).

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 lives. The productive years of life lost costs Hawaii 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 are a major public health problem. Among Hawaii seniors, age 65 or older, falls are the leading cause of fatal injuries (47%)

and injury-related hospitalizations. Falls are costly. For the five-year period, 2007-2011, hospital charges averaged \$117 million a year, with most being paid by Medicare/Medicaid.

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 are in line with program targets with the exception of some on Oahu. This is addressed in part with the addition of a new ambulance for Central Oahu; however, hours of operation have been limited due to staff shortages. EMSIPSB is addressing this issue.

H. Discussion of Program Revenues

§321-232, 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 2012, the department deposited \$32,155,948 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 2012, the department deposited \$5,197,431 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 will be deposited for each cigarette sold; From July 1, 2013 and thereafter, \$.0125 will be deposited for each cigarette sold. In FY 2012, the department deposited \$4,202,864 into the EMS Special Fund.

Act 305, SLH 2006 establishes 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 will be deposited for each cigarette sold; From July 1, 2013 and thereafter, \$.0150 will be deposited for each cigarette sold. In FY 2012, the department deposited \$6,312,364 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 2012, the department deposited \$52,642 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--			
	FY2011-12	FY2012-13	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19
OPERATING COST	303.50*	303.50*	319.50*	319.50*	319.5*	319.5*	319.5*	319.5*
PERSONAL SERVICES	16,519,011	18,697,364	20,020,610	20,362,288	20,362	20,362	20,362	20,362
OTHER CURRENT EXPENSES	62,307,972	74,348,418	81,943,264	81,943,264	81,943	81,943	81,943	81,943
EQUIPMENT	237,033	16,500	16,500	16,500	16	16	16	16
<b>TOTAL OPERATING COST</b>	<b>79,064,016</b>	<b>93,062,282</b>	<b>101,980,374</b>	<b>102,322,052</b>	<b>102,321</b>	<b>102,321</b>	<b>102,321</b>	<b>102,321</b>
BY MEANS OF FINANCING								
GENERAL FUND	108.00*	108.00*	125.00*	125.00*	125.0*	125.0*	125.0*	125.0*
	23,674,000	23,785,948	29,667,667	29,977,442	29,977	29,977	29,977	29,977
SPECIAL FUND	13.50*	13.50*	17.00*	17.00*	17.0*	17.0*	17.0*	17.0*
	9,898,710	14,175,350	17,937,704	17,969,607	17,970	17,970	17,970	17,970
FEDERAL FUNDS	181.50*	181.50*	172.00*	172.00*	172.0*	172.0*	172.0*	172.0*
	45,425,022	53,236,422	45,166,815	45,166,815	45,167	45,167	45,167	45,167
OTHER FEDERAL FUNDS	*	*	5.50*	5.50*	5.5*	5.5*	5.5*	5.5*
			9,004,747	9,004,747	9,004	9,004	9,004	9,004
INTERDEPT. TRANSFER	.50*	.50*	*	*	*	*	*	*
FEDERAL STIMULUS FUNDS	66,284	1,864,562	203,441	203,441	203	203	203	203
TOTAL POSITIONS	303.50*	303.50*	319.50*	319.50*	319.50*	319.50*	319.50*	319.50*
TOTAL PROGRAM COST	79,064,016	93,062,282	101,980,374	102,322,052	102,321	102,321	102,321	102,321

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

	FY 2011-12	FY 2012-13	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19
<b>MEASURES OF EFFECTIVENESS</b>								
1. PERCENT OF PRETERM BIRTHS	12	12	11.6	11.6	11.5	11.5	11.5	11.5
2. % UNINSURED IND REC SUBSIDIZED PRIMARY CARE - POS	30	49	49	49	49	49	49	49
3. % CHILDREN (0-21) W/SP HTH CARE NEEDS W/MEDICAL HM	45.4	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	100	100	100	100	100	100	100	100
6. % OF WIC WOMEN WHO INITIATE BREASTFEEDING	89	90	90	90	90	90	90	90
7. PERCENT OF PRENATAL SMOKING	90	90	90	90	90	90	90	90
8. % INCR DOM./SEXUAL VIOLENCE KNOW. THRU PREV ED SVS	25	25	25	25	25	25	25	25
9. % CHILD 0-3 DEV DELAY BIO AT RISK EI SERV	3.5	3.5	3.5	3.5	3.5	3.5	3.5	3.5
10. % CHILDREN ENROLLED IN HV PROGRAM WHO MED HOME	90	90	95	95	95	95	95	95
<b>PROGRAM TARGET GROUPS</b>								
1. NUMBER OF LIVE BIRTHS	18963	19000	19000	19000	19000	19000	19000	19000
2. NUMBER OF UNINSURED INDIVIDUALS	94400	94400	94400	94400	94400	94400	94400	94400
3. NUMBER OF CHILDREN WITH SPECIAL HEALTH NEEDS	34430	35000	35000	35000	35000	35000	35000	35000
4. NUMBER OF LIVE BIRTHS	18963	19000	19000	19000	19000	19000	19000	19000
5. # WIC ENROLLED WOMEN CHILDREN UP TO 5 YEARS OF AGE	37000	37000	37000	37000	37000	37000	37000	37000
6. # WIC ENROLLED PREGNANT AND POST-PARTUM WOMEN	11503	12000	12000	12000	12000	12000	12000	12000
7. TOTAL NUMBER OF PREGNANT WOMEN	1200	1200	1200	1200	1200	1200	1200	1200
8. FEMALES 15-25 YEARS OF AGE	94575	94575	94575	94575	94575	94575	94575	94575
9. # CHILDREN AGE 0-3 DEV DELAYS OR BIO AT RISK	3500	3500	3500	3500	3500	3500	3500	3500
10. CHILDREN ENROLLED IN A HOME VISITING PROGRAM	400	400	700	900	900	900	900	900
<b>PROGRAM ACTIVITIES</b>								
1. # PREG WOMEN SERVED BY WIC AND PERINATAL SUPPORT	13150	13150	13150	13150	13150	13150	13150	13150
2. # UNINSURED REC DOH SUB PC POS	46000	46000	46000	46000	46000	46000	46000	46000
3. # CSHN 0-21 ASSISTED ACCESS PED SERV (SAFETY NET)	1525	1500	1500	1500	1500	1500	1500	1500
4. # INFANTS SCREENED METABOLIC DISORDERS	510	500	500	500	500	500	500	500
5. # NUTRIT ED CONTACTS/COUNSEL SESS WIC OVERWEIGHT	19750	19750	19750	19750	19750	19750	19750	19750
6. # PRENATAL/POSTPARTUM BRSTFDING INFO TO WIC WOMEN	6750	6750	6750	6750	6750	6750	6750	6750
7. # PREG WMN REC PERINATAL SUPPORT THRU MCHB POS	1500	1500	1500	1500	1500	1500	1500	1500
8. # WOMEN 25- TESTED CHLAMYDIA WITHIN 12 MONTHS	6946	6946	6946	6946	6946	6946	6946	6946
9. # CHILDREN AGE 0-3 DEV DELAYS PROV EARLY INTERVENT	1863	1900	1900	1900	1900	1900	1900	1900
10. # FAMILIES ENROLLED HV + HAVE MED HOME	400	400	700	900	900	900	900	900
<b>PROGRAM REVENUES BY TYPE (IN THOUSANDS of DOLLARS)</b>								
TAXES	6,312	6,750	10,500	10,500	10,500	10,500	10,500	10,500
LICENSES, PERMITS, AND FEES	164	280	280	280	280	280	280	280
REVENUES FROM THE USE OF MONEY AND PROPERTY	8	10	10	10	40	40	40	40
REVENUE FROM OTHER AGENCIES: FEDERAL	44,633	46,677	46,305	45,289	44,981	44,845	44,845	44,845
CHARGES FOR CURRENT SERVICES	1,645	1,710	1,738	1,943	1,944	1,944	1,944	1,944
<b>TOTAL PROGRAM REVENUES</b>	<b>52,762</b>	<b>55,427</b>	<b>58,833</b>	<b>58,022</b>	<b>57,745</b>	<b>57,609</b>	<b>57,609</b>	<b>57,609</b>
<b>PROGRAM REVENUES BY FUND (IN THOUSANDS of DOLLARS)</b>								
SPECIAL FUNDS	52,561	55,427	58,833	58,022	57,745	57,609	57,609	57,609
ALL OTHER FUNDS	201							
<b>TOTAL PROGRAM REVENUES</b>	<b>52,762</b>	<b>55,427</b>	<b>58,833</b>	<b>58,022</b>	<b>57,745</b>	<b>57,609</b>	<b>57,609</b>	<b>57,609</b>

NOTE: PROGRAM REVENUES BY TYPE AND FUND MAY NOT BE ACCURATE DUE TO SYSTEMS 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)

1. Transfer in State Office of Rural Health from HTH 907/AP (3.00/731,740P; 3.00/731,740P)
2. Add funds for Home Visitation Program (0.00/3,000,000A; 0.00/3,000,000A)
3. Delete U fund ceiling to reflect elimination of TANF funding from DHS (0.00/-1,600,000U; 0.00/-1,600,000U)
4. Add Funds to reduce the shortfall in POS funding for Early Intervention Services (0.00/1,271,698A; 0.00/1,271,698A)
5. Add funds to Establish the Perinatal Support Services and Triage (PSST) program and Registered Nurse V (1.00/710,543A; 1.00/751,529A)
6. Add funds for the Preschool Developmental Screening Program and its seven positions (7.00/267,306A; 7.00/436,596A)
7. Change MOF from "P" to "A" for #116631 (Early Childhood Comprehensive Systems) Program Specialist IV (-1.00/-47,412P;-1.00/-47,412P), (1.00/47,412A;1.00/47,412A)
8. Change MOF from "N" to "A" for #112823, (Fetal Alcohol Spectrum Disorder) Program Specialist IV (-1.00/-51,312N; -1.00/-51,312N), (1.00/51,312A; 1.00/51,312A)
9. Change MOF from "B" & "U" to "A" for Child Death Review Registered Nurse IV, #110993 (-0.50/-49,650B; -0.50/-49,650B), (-0.50/-64,590U; -0.50/-64,590U), (1.00/114,240A; 1.00/114,240A)

10. Establish Children & Youth Program Specialist V, #94618 for the Childhood Obesity and Diabetes Prevention Program (1.00/25,656A; 1.00/51,312A)
11. Establish an Office Assistant III, #94620H, for the Childhood Obesity and Diabetes Prevention Program (1.00/12,834A; 1.00/25,668A)
12. Change MOF from "N" to "A" for CSHNB Chief, #03380. (-1.00/120,612N; -1.00/120,612N), (1.00/\$120,612A; 1.00/\$120,612A)
13. Establish permanent Paramedical Assistant, #94643H (1.00/15,434A; 1.00/30,867A) Establish three positions by reallocating \$147,037 from "20" to "10" of Breastfeeding Peer Counseling grant funds (3.00N)
14. Change MOF from "N" to "A" for #31787, Planner IV. (-1.00/-45,576N; -1.00/-45,576N), (1.00/22,788A; 1.00/45,576A)
15. Establish Permanent Oral Health Planner IV, #94628H (1.00/22,788A; 1.00/45,576A)
16. Convert Registered Nurse IV, #118846, from temporary to permanent (1.00/0B; 1.00/0B)
17. Establish Permanent Program Specialist IV, #94625H (1.00/31,903B; 1.00/63,806B)
18. Establish three positions by reallocating \$147,037 from "20" to "10" of Breastfeeding Peer Counseling grant funds (0.00/0N; 0.00/0N)
19. Convert 2.00 Hospital Billing Clerks, #117194, #117195 from Temporary to Permanent (2.00/0B; 2.00/0B)
20. Increase the ceiling of the Community Health Centers Special Fund (0.00/3,750,000B; 0.00/3,750,000B)

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 with

Special Health Needs Branch (CSHNB) activities include a statewide system of mandated 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 defects 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

Multiply Federal agencies assist in the implementation of program activities including the Centers for Disease Control and Prevention (CDC), US Departments of Education 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 52.9% in 2010.
- b. The infant mortality rate for Native Hawaiians was 7.8 per 1,000 births in 2010 while the overall state rate was 5.7 per 1,000 births in 2010.
- c. Women seeking 1st trimester prenatal care was 78.8% in 2010.
- d. The rate of uninsured has increased from 4% to 8.3% overall; 25% of the clients enrolled in the Community Health Centers are uninsured.

Efforts by the Department to address class action suits and newly emergent priorities continue to limit funds designated for prevention activities. Sequestration of federal funds will result in serving fewer members of target groups.

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 effects 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; 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: **TOBACCO SETTLEMENT**

PROGRAM EXPENDITURES	--IN DOLLARS--				--IN THOUSANDS--			
	FY2011-12	FY2012-13	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19
OPERATING COST	50.00*	50.00*	50.00*	50.00*	50.0*	50.0*	50.0*	50.0*
PERSONAL SERVICES	3,504,400	5,539,501	5,728,744	5,728,744	5,729	5,729	5,729	5,729
OTHER CURRENT EXPENSES	28,261,009	51,513,651	51,513,651	51,513,651	51,514	51,514	51,514	51,514
EQUIPMENT		4,750	4,750	4,750	5	5	5	5
<b>TOTAL OPERATING COST</b>	<b>31,765,409</b>	<b>57,057,902</b>	<b>57,247,145</b>	<b>57,247,145</b>	<b>57,248</b>	<b>57,248</b>	<b>57,248</b>	<b>57,248</b>
BY MEANS OF FINANCING								
GENERAL FUND	1.00*	*	*	*	*	*	*	*
	61,880		2,565	2,565	3	3	3	3
	38.00*	39.00*	39.00*	39.00*	39.0*	39.0*	39.0*	39.0*
SPECIAL FUND	26,771,558	50,210,366	50,319,643	50,319,643	50,320	50,320	50,320	50,320
FEDERAL FUNDS	11.00*	11.00*	*	*	*	*	*	*
	4,341,115	5,261,085						
OTHER FEDERAL FUNDS	*	*	11.00*	11.00*	11.0*	11.0*	11.0*	11.0*
			5,335,092	5,335,092	5,335	5,335	5,335	5,335
INTERDEPT. TRANSFER	*	*	*	*	*	*	*	*
	590,856	1,586,451	1,589,845	1,589,845	1,590	1,590	1,590	1,590
<b>TOTAL POSITIONS</b>	<b>50.00*</b>	<b>50.00*</b>	<b>50.00*</b>	<b>50.00*</b>	<b>50.00*</b>	<b>50.00*</b>	<b>50.00*</b>	<b>50.00*</b>
<b>TOTAL PROGRAM COST</b>	<b>31,765,409</b>	<b>57,057,902</b>	<b>57,247,145</b>	<b>57,247,145</b>	<b>57,248</b>	<b>57,248</b>	<b>57,248</b>	<b>57,248</b>

PROGRAM ID: HTH590  
 PROGRAM STRUCTURE: 050105  
 PROGRAM TITLE: TOBACCO SETTLEMENT

	FY 2011-12	FY 2012-13	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19
<b>MEASURES OF EFFECTIVENESS</b>								
1. % INDIVIDUALS WHO MEET PHYSICAL ACTIVITY RCMMDTNS	50.2	50.8	51.5	52.1	52.7	53.4	54	54.6
2. % INDIVIDUALS CONSUME MIN 5 DAILY SERVINGS OF FV	23.1	23.4	23.7	23.9	24.2	24.5	24.8	25.1
3. % INDIVIDUALS WHO SMOKE CIGARETTES	15.8	15.3	14.7	14.2	13.6	13.1	12.5	12.0
4. % ADULTS W/HIGH BLOOD CURRENTLY TAKING MEDS	80.3	81.3	82.3	83.3	84.3	85.3	86.3	87.3
5. % ADULTS W/ DIABETES WHO HAD 2 A1C TESTS PAST YR	66.3	66.3	66.3	66.5	66.7	66.9	67.1	67.3
6. % INDIVIDUALS WHO ARE HOSPITALIZED FOR ASTHMA	.085	.083	.081	.079	.078	.077	.076	.075
7. %ADULTS 50 &OVER RECEIVED.COLORECTAL CANCER SCRNGS	62.8	64.2	65.7	67.1	68.6	70.0	70.3	70.5
<b>PROGRAM TARGET GROUPS</b>								
1. TOTAL NUMBER OF HAWAII RESIDENTS	1374810	1388100	1401400	1414700	1428000	1441300	1454600	1467900
2. TOTAL # OF CHILDREN ATTENDING HI PUBLIC SCHOOLS	180000	173658	169000	170000	171000	172000	173000	174000
3. TOTAL # F SNAP-ELIGIBLE IN HAWAII	273826	305400	308300	311200	314200	317100	320000	322900
4. TOTAL # OF ADULT SMOKERS	175900	175000	170100	165100	160000	154700	149400	143900
5. TOTAL NUMBER OF ADULTS WITH HYPERTENSION	300900	307500	307900	308300	308600	308900	309200	309400
6. TOTAL NUMBER OF ADULTS WITH DIABETES	88000	92900	95900	99100	103300	106500	109800	114200
7. TOTAL NUMBER OF INDIVIDUALS WITH ASTHMA	132400	133600	133200	132800	132300	131800	131300	130700
<b>PROGRAM ACTIVITIES</b>								
1. % PEOPLE REACHED THRU SOCIAL-MARKETING CAMPAIGNS		45	45	45	45	45	45	45
2. # OF COALITIONS MAINTAINED BY THE PROGRAMS	11	11	11	11	11	11	11	11
3. % OF PUBLIC SCHS MTG WELLNESS GUIDELINES	78	79	79	80	81	82	83	84
4. # OF PEOPLE REACHED THROUGH SNAP-ED PROGRAM	9163	24000	25200	26500	27800	29200	30600	32200
5. # OF WEBSITE VISITS TO HHDW & HI HLTH MATTERS	20211	22300	23400	24500	25800	27000	28400	29900
6. # OF PEOPLE REACHED THRU CD SELF-MGMT PROGS	405	2300	2300	2300	2300	2300	2300	2300
7. # TRAININGS FOR STAKEHOLDERS ON CHRONIC DIS ISSUES	124	90	79	79	74	74	74	74
<b>PROGRAM REVENUES BY TYPE (IN THOUSANDS of DOLLARS)</b>								
REVENUE FROM OTHER AGENCIES: FEDERAL	3,240	4,351	3,887	2,540	2,540	2,540	2,540	2,540
REVENUE FROM OTHER AGENCIES: ALL OTHER	48,396	53,498	53,497	53,497	53,497	53,497	53,497	53,497
CHARGES FOR CURRENT SERVICES	18	17	18	19	20	20	20	20
<b>TOTAL PROGRAM REVENUES</b>	<b>51,654</b>	<b>57,866</b>	<b>57,402</b>	<b>56,056</b>	<b>56,057</b>	<b>56,057</b>	<b>56,057</b>	<b>56,057</b>
<b>PROGRAM REVENUES BY FUND (IN THOUSANDS of DOLLARS)</b>								
GENERAL FUNDS	22,672	25,144	13,642	13,642				
SPECIAL FUNDS	28,982	32,722	43,760	42,414	56,057	56,057	56,057	56,057
<b>TOTAL PROGRAM REVENUES</b>	<b>51,654</b>	<b>57,866</b>	<b>57,402</b>	<b>56,056</b>	<b>56,057</b>	<b>56,057</b>	<b>56,057</b>	<b>56,057</b>

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

A. Statement of Program Objective

To ensure that people in Hawaii have healthy beginnings in early childhood, healthy growth and development through childhood, and healthy adult lifestyles based on good nutrition, regular physical activity, and freedom from tobacco use, and to improve the quality and years of healthy life for those living with chronic disease.

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

No major requests.

C. Description of Activities Performed

The Tobacco Settlement Project/Healthy Hawaii Initiative (TSP/HHI) was established pursuant to §328L, HRS, to administer, distribute, and report on the use of the tobacco settlement special fund (TSSF), and implement the public health program activities in the law for health promotion and chronic disease prevention, and tobacco prevention and control. The TSP/HHI addresses the chronic disease risk factors of nutrition, physical activity, and tobacco, and categorical chronic disease areas of asthma, cancer, diabetes, and heart disease and stroke. The program employs policy, systems, and environmental change strategies that are organized around the domains of education, healthcare, worksite, business and industry, and community design and access. The program also conducts activities with the federally qualified health care centers and nonprofit agencies to improve the early detection, treatment, and self-management to improve quality years of life and to reduce the economic burden of chronic disease. Monitoring the health status of the population is done through anonymous adult and school health surveillance systems, and evaluations of activities are conducted to assess the effectiveness of the program strategies. Public education relies on mass media, innovative outreach such as youth theater, and social media to inform and educate people. Capacity-building opportunities

through workshops and conferences are provided to stakeholders. The SNAP-Ed (Supplemental Nutrition Assistance Education Program) services the lower income populations. The Bilingual Health Services (BHS) provides interpreter services for non-English speakers and limited English speaking people living in Hawaii.

D. Statement of Key Policies Pursued

The TSP/HHI responds to policy initiatives on risk factors and chronic disease issues and reports on the distribution, public health use and expenditure of the TSSF. During the 2012 session, the program tracked about 140 measures and testified on 90. The program is responsible for the compliance and administration of §328J, HRS, also known as the smoke-free workplace law. The BHS was established pursuant to §321-301 for bilingual health education aides to assist in providing health education and public health services. In FY2013 the program staffed the Childhood Obesity Prevention Task Force pursuant to Act 269, 2012 HSL, and will report its findings and recommendations, including proposed legislation prior to the 2013 session. The program works with partners to support the tax increases on tobacco and other tobacco products, and to report on the enforcement of retail sales to minors pursuant to §245, HRS as evidence-based policies for reducing tobacco use. Partnerships with State and counties on the implementation of the Complete Streets (§264-20.5, HRS) and Safe Routes to School (§291, HRS) continue to improve opportunities for walking and bicycling. Overall, the TSP/HHI activities are responsive primarily to Chapter 221-Hawaii State Planning Act, Part I, HRS; measurable objectives and outcomes support HRS §226-4(3) of the state goals to achieve physical well-being for individuals and families and encourages community responsibility; aligned with the objectives and policies stated in HRS §226-20 to address the primary prevention and control of chronic disease and to encourage public and private efforts to develop statewide and local strategies to increase daily opportunities and access to physical activity and healthy foods, and access to care and

improving self-management; outcomes align with HRS §226-23, since the protection and design of environments provide opportunities for physical activity.

E. Identification of Important Program Relationships

The program participates in national organizations, aligns with national recommendations, tracks emerging trends, and receives funding from the Centers for Disease Control and Prevention and the United States Department of Agriculture (USDA) SNAPed (as U fund). State agency program partnerships are integral to the work of achieving large scale changes; the program has worked with education, higher education, transportation, agriculture, human resources and development, human services and taxation. Work on policies and state plans, including coordinating training and planning workshops on every island, coalition development, and hosting biannual training conferences are done with external partners. The program partners with the University of Hawaii, Department of Public Health Sciences, School of Medicine for evaluation, Journal of Medicine and Public Health, and to assure the competency of the public health workforce in chronic disease prevention. The DOE remains a critical partner; activities include standards based Health and Physical Education, school food services, Hawaii School Health Surveys, and the DOE Wellness Guidelines implementation and compliance.

F. Description of Major External Trends Affecting the Program

Hawaii's youth obesity rates increased 29% from 1999 to 2011, and adult obesity rates increased 48% from 2000 to 2010. There is a direct correlation between obesity and increasing diabetes risks. Not only will obesity decrease the quality and quantity of years of life for Hawaii's youth and adults, there are dire economic consequences. In a study published by Trogden and Finkelstein (January 2012, Obesity Journal), the authors estimated that Hawaii spent \$470 million in obesity-attributable medical

costs, of which \$71 million was paid by Medicare, and \$77 million by Medicaid. The Affordable Care Act, Title IV, Prevention of Chronic Diseases and Improving Public Health, provides an opportunity to work on policies and system changes

across public health, and other sectors of government, medical providers and insurance (Koh and Sebelius, September 2010).

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

The TSP/HHI relies solely on the TSSF, federal grants, and U fund (USDA SNAP-Ed) for revenues. The Trust for America (July 2008 Issue Report) estimates that for Hawaii, the state would save up to \$6 dollars for every \$1 invested in the prevention of chronic disease.

H. Discussion of Program Revenue

The program budget relies on the state tobacco special settlement special fund, federal grant funding, and U fund, and does not have any general fund request for FB13-15.

I. Summary of Analysis Performed

The program has updated its Program Measures data based on the national Healthy People 2020 Objectives, Hawaii health behavioral trends and plan objectives, available resources, partnerships and opportunities. The 2011 BRFSS methodology changes resulted in a break in trend data and impacts the measures.

J. Further Considerations

None

**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			
	FY2011-12	FY2012-13	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19
OPERATING COST	2.00*	2.00*	2.00*	2.00*	2.0*	2.0*	2.0*	2.0*
PERSONAL SERVICES	146,251	146,251	146,251	146,251	146	146	146	146
OTHER CURRENT EXPENSES	4,128	4,128	4,128	4,128	4	4	4	4
<b>TOTAL OPERATING COST</b>	<b>150,379</b>	<b>150,379</b>	<b>150,379</b>	<b>150,379</b>	<b>150</b>	<b>150</b>	<b>150</b>	<b>150</b>
BY MEANS OF FINANCING								
GENERAL FUND	2.00*	2.00*	2.00*	2.00*	2.0*	2.0*	2.0*	2.0*
	150,379	150,379	150,379	150,379	150	150	150	150
CAPITAL INVESTMENT APPROPRIATIONS								
PLANS	3,000	3,000						
LAND ACQUISITION	1,000	383,000						
DESIGN	4,000	3,000						
CONSTRUCTION	5,991,000	4,246,000						
EQUIPMENT	1,000							
<b>TOTAL CAPITAL APPROPRIATIONS</b>	<b>6,000,000</b>	<b>4,635,000</b>						
BY MEANS OF FINANCING								
G.O. BONDS	6,000,000	4,635,000						
TOTAL POSITIONS	2.00*	2.00*	2.00*	2.00*	2.00*	2.00*	2.00*	2.00*
<b>TOTAL PROGRAM COST</b>	<b>6,150,379</b>	<b>4,785,379</b>	<b>150,379</b>	<b>150,379</b>	<b>150</b>	<b>150</b>	<b>150</b>	<b>150</b>

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

	FY 2011-12	FY 2012-13	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19
<b>MEASURES OF EFFECTIVENESS</b>								
1. % MOE HRA PROG SHOWING BENEFICIAL CHGS (PL VS ACT)	36	36	36	36	36	36	36	36
<b>PROGRAM TARGET GROUPS</b>								
1. PERSONNEL IN HEALTH RESOURCES ADMINISTRATION	760.62	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 SYSTEMS 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			
	FY2011-12	FY2012-13	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19
CURRENT LEASE PAYMENTS								
OTHER CURRENT EXPENSES	320,000	234,000	96,000	32,000	32	32	32	32
TOTAL CURRENT LEASE PAYMENTS C	320,000	234,000	96,000	32,000	32	32	32	32
BY MEANS OF FINANCING								
SPECIAL FUND	320,000	234,000	96,000	32,000	32	32	32	32
OPERATING COST	54.50*	54.50*	54.50*	54.50*	54.5*	54.5*	54.5*	54.5*
PERSONAL SERVICES	7,528,953	10,117,000	10,117,000	10,117,000	10,117	10,117	10,117	10,117
OTHER CURRENT EXPENSES	2,174,047	2,158,280	2,296,280	2,360,280	2,360	2,360	2,360	2,360
TOTAL OPERATING COST	9,703,000	12,275,280	12,413,280	12,477,280	12,477	12,477	12,477	12,477
BY MEANS OF FINANCING								
SPECIAL FUND	9,703,000	12,275,280	12,413,280	12,477,280	12,477	12,477	12,477	12,477
CAPITAL INVESTMENT APPROPRIATIONS								
PLANS	1,000							
DESIGN	1,339,000							
EQUIPMENT	5,900,000	7,100,000	14,321,000	359,000				
TOTAL CAPITAL APPROPRIATIONS	7,240,000	7,100,000	14,321,000	359,000				
BY MEANS OF FINANCING								
G.O. BONDS	7,240,000	7,100,000	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	17,263,000	19,609,280	26,830,280	12,868,280	12,509	12,509	12,509	12,509



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

	FY 2011-12	FY 2012-13	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19
<b>MEASURES OF EFFECTIVENESS</b>								
1. BOARD APPROVED OPERATING EXPENSE BUDGET TO ACTUAL	10023	12455	12236	12259	12259	12259	12259	12259
<b>PROGRAM REVENUES BY TYPE (IN THOUSANDS of DOLLARS)</b>								
REVENUE FROM OTHER AGENCIES: FEDERAL	128,276	132,045	132,145	132,145	132,145	132,145	132,145	132,145
CHARGES FOR CURRENT SERVICES	346,132	356,412	356,310	356,310	356,310	356,310	356,310	356,310
NON-REVENUE RECEIPTS	8	8	8	8	8	8	8	8
TOTAL PROGRAM REVENUES	474,416	488,465	488,463	488,463	488,463	488,463	488,463	488,463
<b>PROGRAM REVENUES BY FUND (IN THOUSANDS of DOLLARS)</b>								
SPECIAL FUNDS	474,416	488,465	488,463	488,463	488,463	488,463	488,463	488,463
TOTAL PROGRAM REVENUES	474,416	488,465	488,463	488,463	488,463	488,463	488,463	488,463

NOTE: PROGRAM REVENUES BY TYPE AND FUND MAY NOT BE ACCURATE DUE TO SYSTEMS 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 REQUESTS AND COMPLIANCE WITH SECTION 37-68(1)(A)(B)**

CIP request of \$14,321,000 in FY 14 and \$359,000 in FY 15 for the continuation of the Hospital Information / Electronic Medical Record Systems project for the Corporation.

**C. DESCRIPTION OF ACTIVITIES PERFORMED**

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, financial management, legal counsel, personnel management, information systems, and technical services to support its community hospitals.

**D. STATEMENT OF KEY POLICIES PURSUED**

Dedication to excellence in providing accessible, comprehensive health care services that are quality driven, customer-focused, and cost effective. 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, President and 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 is forecast to increase, which is expected to create greater financial challenges that may not be fully reflected in the budget requirements for HHSC regions.

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. Most severe current trends are the necessities for paying physicians to provide emergency physician services and specialty physician on-call.

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 market basket reductions alone will have a significant detrimental impact to reimbursements for HHSC's three acute care facilities.

G. DISCUSSION OF COST, EFFECTIVENESS, AND PROGRAM SIZED DATA Threats to HHSC.

Labor costs constitute over 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 HGEA and UPW, HHSC is basically restricted from modifying salary and benefits and virtually precluded from outsourcing

work. 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 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 Department of Health (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 REVENUE

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.

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			
	FY2011-12	FY2012-13	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19
OPERATING COSTS								
PERSONAL SERVICES								
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								
DESIGN			176,000	112,000				
CONSTRUCTION			686,000	551,000				
EQUIPMENT			600,000	100,000				
TOTAL CAPITAL APPROPRIATIONS			1,462,000	763,000				
BY MEANS OF FINANCING								
G.O. BONDS			1,462,000	763,000				
TOTAL POSITIONS								
TOTAL PROGRAM COST	1,500,000*	1,500,000*	2,962,000*	2,263,000*	1,500*	1,500*	1,500*	1,500*

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

	FY 2011-12	FY 2012-13	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19
<b>MEASURES OF EFFECTIVENESS</b>								
1. OCCUPANCY RATE - ACUTE CARE	38	48	54	55	57	60	62	64
2. OCCUPANCY RATE - LONG-TERM CARE	98	98	99	99	99	99	99	99
3. AVERAGE LENGTH OF STAY - ACUTE CARE (DAYS)	11.6	12.3	12.4	12.3	12.5	12.5	12.5	12.5
4. AVERAGE LENGTH OF STAY - LONG-TERM CARE (DAYS)	897	900	723	723	725	725	725	725
5. AVERAGE OPERATING COST PER PATIENT DAY(EXCL EQUIP)	1895.58	1820.99	846.46	871.85	898.01	924.95	952.7	981.28
6. AVERAGE PATIENT REVENUE PER PATIENT DAY	1538.02	1590.96	1075	1111.15	1132.57	1164.96	1194.67	1224.92
<b>PROGRAM TARGET GROUPS</b>								
1. EST. POPULATION OF SERVICE AREA (RESIDENTS)	22500	22500	22500	22500	22500	22500	22500	22500
<b>PROGRAM ACTIVITIES</b>								
1. NUMBER OF IN-PATIENT ADMISSIONS - ACUTE CARE	133	158	175	180	185	195	202	208
2. NUMBER OF IN-PATIENT DAYS - ACUTE CARE	1542	1942	2170	2215	2280	2400	2480	2560
3. NUMBER OF EMERGENCY ROOM VISITS	4755	4886	5245	5325	5405	5486	5568	5652
4. NUMBER OF ADMISSIONS - LONG-TERM CARE	4	4	5	5	5	5	5	5
5. NUMBER OF PATIENT DAYS - LONG-TERM CARE	3586	3598	3615	3618	3620	3620	3620	3620

NOTE: PROGRAM REVENUES BY TYPE AND FUND MAY NOT BE ACCURATE DUE TO SYSTEMS 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)

Also CIP requests totaling \$1,462,000 in fiscal year 2014 and \$763,000 in fiscal year 2015 to replace aging equipment, building improvement, and to expand current services or to make space for new services.

C. DESCRIPTION OF ACTIVITIES PERFORMED

Facilities. The major activities and service provided by the Oahu Region Board, Kahuku Medical Center Board, regional management team, and medical center management team facilities 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, respiratory therapy, physical and occupational therapy, social services, pharmacy, and dietary. Support services include administration, admitting, business, personnel, medical records, logistics, housekeeping, and maintenance.

D. STATEMENT OF KEY POLICIES PURSUED

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 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 Kahuku Medical Center through the Oahu Regional Board, Oahu Regional CEO and Oahu Regional staff. Medical Center management and advice is provided by the Kahuku Medical Center board. 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 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 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 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.

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 and the ability to attract qualified health care professionals in all fields.

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 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			
	FY2011-12	FY2012-13	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19
CURRENT LEASE PAYMENTS								
OTHER CURRENT EXPENSES	12,301,000	12,260,000	14,285,000	11,488,000	11,488	11,488	11,488	11,488
TOTAL CURRENT LEASE PAYMENTS C	12,301,000	12,260,000	14,285,000	11,488,000	11,488	11,488	11,488	11,488
BY MEANS OF FINANCING								
SPECIAL FUND	12,301,000	12,260,000	14,285,000	11,488,000	11,488	11,488	11,488	11,488
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	339,416,184	374,296,267	363,768,000	374,210,000	374,210	374,210	374,210	374,210
OTHER CURRENT EXPENSES	223,074,816	204,253,900	213,470,900	205,825,900	205,826	205,826	205,826	205,826
TOTAL OPERATING COST	562,491,000	578,550,167	577,238,900	580,035,900	580,036	580,036	580,036	580,036
BY MEANS OF FINANCING								
GENERAL FUND	71,875,585	82,140,000	82,940,000	82,940,000	82,940	82,940	82,940	82,940
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*
	490,615,415	496,410,167	494,298,900	497,095,900	497,096	497,096	497,096	497,096
CAPITAL INVESTMENT APPROPRIATIONS								
PLANS	2,000	1,055,000	4,802,000	500,000				
DESIGN	403,000	785,000	1,829,000	2,954,000				
CONSTRUCTION	25,623,000	37,275,000	19,564,000	31,854,000	4,650			
EQUIPMENT	1,452,000	3,001,000	8,022,000	13,570,000				
TOTAL CAPITAL APPROPRIATIONS	27,480,000	42,116,000	34,217,000	48,878,000	4,650			
BY MEANS OF FINANCING								
G.O. BONDS	27,480,000	42,116,000	34,217,000	48,878,000	4,650			
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	602,272,000	632,926,167	625,740,900	640,401,900	596,174	591,524	591,524	591,524

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

	FY 2011-12	FY 2012-13	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19
<b>MEASURES OF EFFECTIVENESS</b>								
1. AVERAGE OPERATING COST PER PATIENT DAY (EXCL EQPT)	1619	1612	1612	1612	1612	1612	1612	1612
2. AVERAGE PATIENT REVENUE PER PATIENT DAY	1388	1421	1421	1421	1421	1421	1421	1421
3. OCCUPANCY RATE - ACUTE CARE	57.81	55.84	55.84	55.84	55.84	55.84	55.84	55.84
4. OCCUPANCY RATE - LONG-TERM CARE	87.97	88.64	88.64	88.64	88.64	88.64	88.64	88.64
<b>PROGRAM TARGET GROUPS</b>								
1. EST. POPULATION OF SERVICE AREA - EAST HAWAII	115778	116588	116588	116588	116588	116588	116588	116588
2. EST. POPULATION OF SERVICE AREA - WEST HAWAII	70960	71457	71457	71457	71457	71457	71457	71457
3. EST. POPULATION OF SERVICE AREA - MAUI	156764	158488	158488	158488	158488	158488	158488	158488
4. EST. POPULATION OF SERVICE AREA - KAUAI	67701	68175	68175	68175	68175	68175	68175	68175
5. EST. POPULATION SERVICE AREA OVER 65 - EAST HAWAII	17529	17651	17651	17651	17651	17651	17651	17651
6. EST. POPULATION SERVICE AREA OVER 65 - WEST HAWAII	10744	10819	10819	10819	10819	10819	10819	10819
7. EST. POPULATION SERVICE AREA OVER 65 - MAUI	20929	21159	21159	21159	21159	21159	21159	21159
8. EST. POPULATION SERVICE AREA OVER 65 - OAHU	142830	143973	143973	143973	143973	143973	143973	143973
9. EST. POPULATION SERVICE AREA OVER 65 - KAUAI	10512	10585	10585	10585	10585	10585	10585	10585
<b>PROGRAM ACTIVITIES</b>								
1. NUMBER OF IN-PATIENT ADMISSIONS - ACUTE CARE	21168	23645	23645	23645	23645	23645	23645	23645
2. NUMBER OF IN-PATIENT DAYS - ACUTE CARE	109683	105163	105163	105163	105163	105163	105163	105163
3. NUMBER OF BIRTHS	3566	3605	3605	3605	3605	3605	3605	3605
4. NUMBER OF ADMISSIONS - LONG-TERM CARE	1396	1315	1315	1315	1315	1315	1315	1315
5. NUMBER OF PATIENT DAYS - LONG-TERM CARE	250528	251480	251480	251480	251480	251480	251480	251480
6. NUMBER OF EMERGENCY ROOM (ER) VISITS	105029	106204	106204	106204	106204	106204	106204	106204

NOTE: PROGRAM REVENUES BY TYPE AND FUND MAY NOT BE ACCURATE DUE TO SYSTEMS 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 REQUESTS AND COMPLIANCE WITH SECTION 37-68(1)(A)(B)**

Increase general fund appropriation by \$800,000 in both fiscal year 2014 and fiscal year 2015 for the Hale Makemae program at Kula Hospital. This is the only ICF/MR program in the State of Hawaii. The Hale Makemae program is a preeminent example of the type of safety-net services that HHSC provides to its communities.

Lump Sum CIP request of \$50,000,000 in each of the biennium fiscal years for the life and safety projects for all HHSC facilities. Note that portion of the funding is mentioned in HTH 210 and HTH 211 narratives.

**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**

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, President and 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.

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.

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.

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.

G. DISCUSSION OF COST, EFFECTIVENESS, AND PROGRAM SIZED DATA

Labor costs constitute over 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 HGEA and UPW, HHSC is basically restricted from modifying salary and benefits and virtually precluded from outsourcing work. Pay raises for HHSC are negotiated by OCB, 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 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, and prior accrual of employee benefits, overpayment reimbursements to the federal government, and over \$45 million in deferred maintenance and repair of facilities. HHSC has taken aggressive management actions to cope with these liabilities such as active management, including negotiated settlements, of millions of dollars of workers 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 Department of Health (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 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.

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			
	FY2011-12	FY2012-13	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19
OPERATING COSTS								
PERSONAL SERVICES								
OTHER CURRENT EXPENSES			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	2,500	2,500	2,500
BY MEANS OF FINANCING								
SPECIAL FUND			2,500,000	2,500,000	2,500	2,500	2,500	2,500
TOTAL POSITIONS	*	*	*	*	*	*	*	*
TOTAL PROGRAM COST			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 2011-12	FY 2012-13	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19
<u>MEASURES OF EFFECTIVENESS</u>								
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 SYSTEMS ERROR.

A. STATEMENT OF PROGRAM OBJECTIVES

No Data

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

Request to increase the special fund ceiling by \$1,000,000 in each of year of the biennium budget to allow HHSC to transfer funds to subsidize operating deficits for both Roselani Place and Aii Health Center.

C. DESCRIPTION OF ACTIVITIES PERFORMED

No Data

D. STATEMENT OF KEY POLICIES PURSUED

No Data

E. IDENTIFICATION OF IMPORTANT PROGRAM RELATIONSHIPS

No Data

F. DESCRIPTION OF MAJOR EXTERNAL TRENDS AFFECTING THE PROGRAM

No Data

G. DISCUSSION OF COST, EFFECTIVENESS, AND PROGRAM SIZED DATA

No Data

H. DISCUSSION OF PROGRAM REVENUE

No Data

I. SUMMARY OF ANALYSIS PERFORMED

No Data

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			
	FY2011-12	FY2012-13	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19
OPERATING COST	145.50*	145.50*	145.50*	145.50*	145.5*	145.5*	145.5*	145.5*
PERSONAL SERVICES	14,376,811	16,157,983	16,713,504	16,713,504	16,714	16,714	16,714	16,714
OTHER CURRENT EXPENSES	62,625,684	69,339,388	69,339,388	69,339,388	69,339	69,339	69,339	69,339
<b>TOTAL OPERATING COST</b>	<b>77,002,495</b>	<b>85,497,371</b>	<b>86,052,892</b>	<b>86,052,892</b>	<b>86,053</b>	<b>86,053</b>	<b>86,053</b>	<b>86,053</b>
BY MEANS OF FINANCING	145.50*	145.50*	145.50*	145.50*	145.5*	145.5*	145.5*	145.5*
GENERAL FUND	71,566,530	72,255,141	72,810,662	72,810,662	72,811	72,811	72,811	72,811
SPECIAL FUND	4,382,492	11,610,000	11,610,000	11,610,000	11,610	11,610	11,610	11,610
FEDERAL FUNDS	1,053,473	1,632,230	1,632,230	1,632,230	1,632	1,632	1,632	1,632
TOTAL POSITIONS	145.50*	145.50*	145.50*	145.50*	145.50*	145.50*	145.50*	145.50*
TOTAL PROGRAM COST	77,002,495	85,497,371	86,052,892	86,052,892	86,053	86,053	86,053	86,053

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

	FY 2011-12	FY 2012-13	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19
<b>MEASURES OF EFFECTIVENESS</b>								
1. % CONSUMERS LIVING INDEPENDENTLY	56.5	56	56	57	57	58	58	59
2. % CONSUMERS EMPLOYED	10	15	15	16	16	17	17	18
3. % SATISFIED CONSUMERS	88	85	85	86	86	87	87	88
<b>PROGRAM TARGET GROUPS</b>								
1. EST PREVAL ADULTS W/SEVERE PERSIST MENTAL ILLNESS	27825	28040	28260	28500	28700	28900	29100	29300
2. # PERS SERVED IN CRISIS SERVICES	2563	2600	2620	2640	2660	2680	2700	2720
<b>PROGRAM ACTIVITIES</b>								
1. # CONSUMERS SERVED: CMHCS	5116	5200	5250	5300	5350	5400	5450	5500
2. # CONSUMERS SERVED: POS PROGRAMS	7653	7700	7750	7800	7850	7900	7950	8000
3. # ELIGIBILITY DETERMINATIONS PERFORMED	1049	1100	1120	1140	1160	1180	1200	1220
4. # CMHC ADMISSIONS	1261	1200	1250	1300	1350	1400	1450	1500
5. # CMHC DISCHARGES	1431	1400	1200	1250	1300	1350	1400	1450
6. # CONSUMERS SERVED: SPEC RESIDENTIAL SERVICES	140	148	150	150	150	150	150	150
7. # CONSUMERS SERVED: GROUP HOME SERVICES	736	740	760	780	800	820	840	860
<b>PROGRAM REVENUES BY TYPE (IN THOUSANDS of DOLLARS)</b>								
REVENUE FROM OTHER AGENCIES: FEDERAL	1,471	1,471	1,470	1,470	1,470	1,470	1,470	1,470
CHARGES FOR CURRENT SERVICES	10,127	10,127	10,127	10,122	10,122	10,122	10,122	10,122
NON-REVENUE RECEIPTS	4	4	4	4	4	4	4	4
TOTAL PROGRAM REVENUES	11,602	11,602	11,601	11,596	11,596	11,596	11,596	11,596
<b>PROGRAM REVENUES BY FUND (IN THOUSANDS of DOLLARS)</b>								
SPECIAL FUNDS	11,602	11,602	11,601	11,596	11,596	11,596	11,596	11,596
TOTAL PROGRAM REVENUES	11,602	11,602	11,601	11,596	11,596	11,596	11,596	11,596

NOTE: PROGRAM REVENUES BY TYPE AND FUND MAY NOT BE ACCURATE DUE TO SYSTEMS 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)

None.

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			
	FY2011-12	FY2012-13	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19
CURRENT LEASE PAYMENTS								
OTHER CURRENT EXPENSES	6,796	6,796						
TOTAL CURRENT LEASE PAYMENTS C	6,796	6,796						
BY MEANS OF FINANCING								
GENERAL FUND	6,796	6,796						
OPERATING COST	615.00*	615.00*	615.00*	615.00*	615.0*	615.0*	615.0*	615.0*
PERSONAL SERVICES	34,920,053	34,065,905	35,343,719	35,343,719	35,344	35,344	35,344	35,344
OTHER CURRENT EXPENSES	15,762,453	17,551,938	17,551,938	17,551,938	17,552	17,552	17,552	17,552
TOTAL OPERATING COST	50,682,506	51,617,843	52,895,657	52,895,657	52,896	52,896	52,896	52,896
BY MEANS OF FINANCING								
GENERAL FUND	50,682,506	51,617,843	52,895,657	52,895,657	52,896	52,896	52,896	52,896
CAPITAL INVESTMENT APPROPRIATIONS								
DESIGN	1,430,000	300,000	300,000					
CONSTRUCTION	10,184,000	2,500,000	950,000					
TOTAL CAPITAL APPROPRIATIONS	11,614,000	2,800,000	1,250,000					
BY MEANS OF FINANCING								
G.D. BONDS	11,614,000	2,800,000	1,250,000					
TOTAL POSITIONS	615.00*	615.00*	615.00*	615.00*	615.00*	615.00*	615.00*	615.00*
TOTAL PROGRAM COST	62,303,302	54,424,639	54,145,657	52,895,657	52,896	52,896	52,896	52,896

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

	FY 2011-12	FY 2012-13	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19
<b>MEASURES OF EFFECTIVENESS</b>								
1. % PATIENTS DISCHARGED TO COMMUNITY-BASED SVCS	66	56	70	70	70	70	70	70
2. % CLIENTS TREATED/DISCH W/CONT COMM TENURE > 12 MO	36	20	30	30	30	30	30	30
<b>PROGRAM TARGET GROUPS</b>								
1. # PENAL COMMITMENT PATIENTS	267	276	222	222	222	222	222	222
2. # CIVIL COMMITMENT PATIENTS	10	8	8	8	8	8	8	8
<b>PROGRAM ACTIVITIES</b>								
1. # NEW ADMISSIONS	118	128	87	87	87	87	87	87
2. # READMISSIONS	159	152	143	143	143	143	143	143
3. # DISCHARGES	258	227	227	227	227	227	227	227
4. # FORENSIC/COURT-ORDERED ADMISSIONS	276	228	228	228	228	228	228	228
<b>PROGRAM REVENUES BY TYPE (IN THOUSANDS of DOLLARS)</b>								
CHARGES FOR CURRENT SERVICES	117	117	117	117	117	117	117	117
TOTAL PROGRAM REVENUES	117	117	117	117	117	117	117	117
<b>PROGRAM REVENUES BY FUND (IN THOUSANDS of DOLLARS)</b>								
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 SYSTEMS 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)

Hawaii State Hospital, Repairs and Improvements, Oahu - Request for funds for door and window improvements and updating of a master plan for Hawaii State Hospital (0.00/1,250,000C; 0.00/0C).

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			
	FY2011-12	FY2012-13	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19
OPERATING COST	28.00*	28.00*	28.00*	28.00*	28.0*	28.0*	28.0*	28.0*
PERSONAL SERVICES	1,669,657	2,284,555	2,361,600	2,361,600	2,361	2,361	2,361	2,361
OTHER CURRENT EXPENSES	33,996,098	30,576,106	30,576,106	30,576,106	30,576	30,576	30,576	30,576
EQUIPMENT	13,789							
<b>TOTAL OPERATING COST</b>	<b>35,679,544</b>	<b>32,860,661</b>	<b>32,937,706</b>	<b>32,937,706</b>	<b>32,937</b>	<b>32,937</b>	<b>32,937</b>	<b>32,937</b>
BY MEANS OF FINANCING	22.00*	22.00*	22.00*	22.00*	22.0*	22.0*	22.0*	22.0*
GENERAL FUND	18,454,326	18,533,930	18,575,362	18,575,362	18,575	18,575	18,575	18,575
SPECIAL FUND	300,000	500,000	500,000	500,000	500	500	500	500
FEDERAL FUNDS	6.00*	6.00*	6.00*	6.00*	6.0*	6.0*	6.0*	6.0*
FEDERAL FUNDS	16,925,218	13,826,731	7,915,082	7,915,082	7,915	7,915	7,915	7,915
OTHER FEDERAL FUNDS	*	*	5,947,262	5,947,262	5,947	5,947	5,947	5,947
<b>TOTAL POSITIONS</b>	<b>28.00*</b>	<b>28.00*</b>	<b>28.00*</b>	<b>28.00*</b>	<b>28.00*</b>	<b>28.00*</b>	<b>28.00*</b>	<b>28.00*</b>
<b>TOTAL PROGRAM COST</b>	<b>35,679,544</b>	<b>32,860,661</b>	<b>32,937,706</b>	<b>32,937,706</b>	<b>32,937</b>	<b>32,937</b>	<b>32,937</b>	<b>32,937</b>

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

	FY 2011-12	FY 2012-13	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19
<b>MEASURES OF EFFECTIVENESS</b>								
1. % OF INDIVIDUALS SUCCESSFULLY COMPLETING TX SVCS	47	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	660	450	490	520	550	580	580	580
4. % ATTENDEES RPTING SATISFACTION W/ TRNG EVENTS	99	99	99	99	99	99	99	99
5. # SA TX PROGS THAT OBTAIN/MAINTAIN ACCREDITATION	24	25	25	25	25	25	25	25
<b>PROGRAM TARGET GROUPS</b>								
1. INDIVIDUALS IN NEED OF SA TREATMENT SVCS	93924	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	400	350	350	350	350	350	350	350
4. # SA DIRECT SVC STAFF THAT CAN BENEFIT FR SA TRNGS	1145	1000	1000	1000	1000	1000	1000	1000
5. # OF SA TX PROGS THAT REQUIRE ACCREDITATION	24	33	33	33	33	33	33	33
<b>PROGRAM ACTIVITIES</b>								
1. # OF INDIVIDUALS RECEIVING TX SVCS	5552	5450	5450	5450	5450	5450	5450	5450
2. # OF INDIVIDUALS RECEIVE CURRICULUM-BASE PREV SVCS	17973	1300	1300	1300	1300	1300	1300	1300
3. # PROVIDED INFO RE STATUS OF SA CERT/RECERT APP	432	420	420	420	420	420	420	420
4. # SA CERT PROFS-OTHER SA STAFF ENROLLED IN TRNG	3270	3000	3000	3000	3000	3000	3000	3000
5. # OF SA TX PROGS REVIEWED FOR ACCREDITATION	24	33	33	33	33	33	33	33
<b>PROGRAM REVENUES BY TYPE (IN THOUSANDS of DOLLARS)</b>								
REVENUE FROM OTHER AGENCIES: FEDERAL	16,323	10,907	10,882	10,931	8,058	8,058	8,058	8,058
FINES, FORFEITS AND PENALTIES	554	550	550	550	550	550	550	550
TOTAL PROGRAM REVENUES	16,877	11,457	11,432	11,481	8,608	8,608	8,608	8,608
<b>PROGRAM REVENUES BY FUND (IN THOUSANDS of DOLLARS)</b>								
SPECIAL FUNDS	16,877	11,457	11,432	11,481	8,608	8,608	8,608	8,608
TOTAL PROGRAM REVENUES	16,877	11,457	11,432	11,481	8,608	8,608	8,608	8,608

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

A. Statement of Program Objectives

To provide leadership in 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)

There are no significant budget requests.

C. Description of Activities Performed

Major activities include adult and adolescent substance abuse prevention and treatment services that are provided by private, non-profit agencies.

Substance abuse treatment services address addiction and relapse issues to prevent or interrupt the dependence and relapse cycle. Recovery support services sustain treatment gains and clients achieving a drug-free lifestyle. Treatment services include adult residential, intensive outpatient, outpatient, non-medical residential detoxification, methadone maintenance; and adolescent school- and community-based outpatient services. Priority populations continue to be pregnant women, parenting women with children, adolescents, injection drug users, Native Hawaiians and adult offenders.

Substance abuse prevention promotes lifestyles and norms that discourage alcohol and other drug use and the development of social and physical environments that facilitate drug-free lifestyles. Substance abuse prevention is an ongoing process that must relate to each emerging generation by reducing risk factors or to enhance protective factors in the individual/peer, family, school and community domains.

Other activities include developing requests for proposals, processing contracts, monitoring service delivery, fiscal management, evaluating

outcomes and providing technical assistance to service provider agencies. Training services include completion of training assessments annually and development of training sites and curricula.

D. Statement of Key Policies Pursued

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

E. Identification of Important Program Relationships

1. Other State agencies—Departments of Human Services, Education, Public Safety and Attorney General; and State Procurement Office.
2. County agencies—Hawaii, Kauai, Maui and City and County of Honolulu.
3. Private health and social service agencies that provide substance abuse prevention and treatment services.
4. Federal agencies—Department of Health and Human Services, Substance Abuse and Mental Health Services Administration; and Department of Justice, Office of Juvenile Justice and Delinquency Prevention.

F. Description of Major External Trends Affecting the Program

Economic conditions contribute to altering accustomed patterns of living (unemployment, home foreclosures, homelessness, and bankruptcies). Conditions may lead to increased stress on individuals and families that may increase demand for substance abuse services; increased availability of drugs, including marijuana and "ice" or crystal methamphetamine; increased numbers of drug exposed infants; increased risk of HIV infection among substance abusing populations; increased focus on outcome objectives; and federal influence in shaping the direction of substance abuse programs and services based on national health care policy, specifically the Affordable Care Act.

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

Substance abuse treatment programs achieved significant results during FY 2012. Outcomes for 6-month follow-ups for a sample of 1,149 adolescents are: 98.4% were employed, or enrolled in school or vocational training; 90.2% had no arrests since discharge; 55.1% had no substance use in 30 days prior to follow-up; 82.9% had no new substance abuse treatment; 95.8% had no hospitalizations; 93.7% had no emergency room visits; 85.7% had no psychological distress since discharge; and 97.5% were in stable living arrangements. Outcomes for 6-month follow-ups for a sample of 1,251 adults are: 58.8% were employed, or enrolled in school or vocational training; 86.1% had no arrests since discharge; 75.0% had no substance use in 30 days prior to follow-up; 70.5% had no new substance abuse treatment; 92.5% had no hospitalizations; 89.4% had no emergency room visits; 48.8% participated in self-help group activities; 90.7% had no psychological distress since discharge; and 74.7% were in stable living arrangements.

Assessments document 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 2012, ADAD

funded treatment for more than 3,000 adults. The 2007-08 Hawaii Student Alcohol and Drug Use Survey findings indicate that 1.6% of 6th graders, 4.8% of 8th graders, 10.5% of 10th graders, and 17.8% of 12th graders—or approximately 6,306 students statewide—meet the criteria for needing substance abuse treatment. In 2012, ADAD funded treatment for more than 2,000 students in grades 6 through 12 who met criteria for needing substance abuse treatment.

H. Discussion of Program Revenues

Allocations received from the Substance Abuse Prevention and Treatment Block Grant (at \$7.6 million) for substance abuse prevention and treatment services, and OJJDP funding (at \$300,000) for the enforcement of underage drinking laws will continue near current levels. Time-limited, discretionary federal grants have been awarded for: 4-year \$2.9 million Access to Recovery Grant to provide vouchers for recovery support services; 3-year contract (at \$255,000 per year) to conduct Food and Drug Administration inspections for compliance with Tobacco Control Act provisions; and a 1-year \$190,000 State Epidemiological Outcomes Workgroup (SEOW) contract to enhance work of the Strategic Prevention Framework - State Incentive Grant and expand the State's substance abuse prevention focus.

I. Summary of Analysis Performed

None.

J. Further Considerations

None.

**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			
	FY2011-12	FY2012-13	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19
OPERATING COST	185.50*	185.50*	185.50*	185.50*	185.5*	185.5*	185.5*	185.5*
PERSONAL SERVICES	13,470,978	12,979,709	13,419,494	13,419,494	13,420	13,420	13,420	13,420
OTHER CURRENT EXPENSES	49,078,174	48,605,174	48,605,174	48,605,174	48,607	48,607	48,607	48,607
EQUIPMENT			116,200					
<b>TOTAL OPERATING COST</b>	<b>62,549,152</b>	<b>61,584,883</b>	<b>62,140,868</b>	<b>62,024,668</b>	<b>62,027</b>	<b>62,027</b>	<b>62,027</b>	<b>62,027</b>
<b>BY MEANS OF FINANCING</b>								
GENERAL FUND	40,811,045	40,012,731	40,502,331	40,386,131	40,388	40,388	40,388	40,388
SPECIAL FUND	15,033,910	14,930,963	14,985,824	14,985,824	14,986	14,986	14,986	14,986
FEDERAL FUNDS	4,439,309	4,382,719	2,387,825	2,387,825	2,388	2,388	2,388	2,388
OTHER FEDERAL FUNDS			2,000,000	2,000,000	2,000	2,000	2,000	2,000
INTERDEPT. TRANSFER	2,264,888	2,258,470	2,264,888	2,264,888	2,265	2,265	2,265	2,265
<b>TOTAL POSITIONS</b>	<b>185.50*</b>	<b>185.50*</b>	<b>185.50*</b>	<b>185.50*</b>	<b>185.50*</b>	<b>185.50*</b>	<b>185.50*</b>	<b>185.50*</b>
<b>TOTAL PROGRAM COST</b>	<b>62,549,152</b>	<b>61,584,883</b>	<b>62,140,868</b>	<b>62,024,668</b>	<b>62,027</b>	<b>62,027</b>	<b>62,027</b>	<b>62,027</b>

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

	FY 2011-12	FY 2012-13	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19
<b>MEASURES OF EFFECTIVENESS</b>								
1. PERCENT OF YOUTHS ADMITTED TO RESIDENTIAL PROGRAMS	20	15	15	15	15	15	15	15
2. AVE LENGTH STAY (DAYS) CHDRN/YOUTH IN RESDNTL PRGM	146	170	170	170	170	170	170	170
3. % REGIS YOUTHS SHOWNG IMPRVMT BY CAFAS OR CBCL	58	67	67	67	67	67	67	67
4. % OF DIRECT SVC EXP FOR WHICH FED REIMB WERE RECVD	19	23	23	23	23	23	23	23
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	1	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	47	60	60	60	60	60	60	60
9. # OF HOURS DEVOTED TO TRAIN/DEV OF STAFF/PROVIDERS	690	500	500	500	500	500	500	500
<b>PROGRAM TARGET GROUPS</b>								
1. # CHRNYOUTH IDENTIF UNDER IND W/DISAB ACT/SEC 504	1741	1500	1500	1500	1500	1500	1500	1500
2. # CHDRN IDENTIFIED BY CAMHD AS QUALIF FOR HI QUEST	1366	1500	1500	1500	1500	1500	1500	1500
3. NO. OF CHILDREN AND YOUTH IN RESIDENTIAL PROGRAMS	381	375	375	375	375	375	375	375
4. NUMBER OF PURCHASE-OF-SERVICE PROGRAMS	30	30	30	30	30	30	30	30
<b>PROGRAM ACTIVITIES</b>								
1. # CHDRN/YOUTH RECV SVCS IN HOSPITAL-BASED RES PROG	571	75	75	75	75	75	75	75
2. # CHRNYOUTH RECV SVC NON-HOSPITAL-BASED RES PROG	324	400	400	400	400	400	400	400
3. # CHDRN/YOUTH RECVNG HOME & COMMUNITY BASED SVCS	1561	2000	2000	2000	2000	2000	2000	3000
4. TOTAL AMOUNT (IN 1000'S) BILLED FOR SVCS PROVIDED	33080	37000	37000	37000	37000	37000	37000	37000
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	135	200	200	200	200	200	200	200
7. TOT # OF HOURS CLINICAL TRNING SPONSORED BY CAMHD	148	175	175	175	175	175	175	175
<b>PROGRAM REVENUES BY TYPE (IN THOUSANDS of DOLLARS)</b>								
REVENUES FROM THE USE OF MONEY AND PROPERTY	10	10	10	10	10	10	10	10
REVENUE FROM OTHER AGENCIES: FEDERAL	4,772	3,475	2,805	2,304	1,304	1,304	1,304	1,304
CHARGES FOR CURRENT SERVICES	7,695	8,750	8,750	8,750	8,750	8,750	8,750	8,750
TOTAL PROGRAM REVENUES	12,477	12,235	11,565	11,064	10,064	10,064	10,064	10,064
<b>PROGRAM REVENUES BY FUND (IN THOUSANDS of DOLLARS)</b>								
SPECIAL FUNDS	12,477	12,235	11,565	11,064	10,064	10,064	10,064	10,064
TOTAL PROGRAM REVENUES	12,477	12,235	11,565	11,064	10,064	10,064	10,064	10,064

NOTE: PROGRAM REVENUES BY TYPE AND FUND MAY NOT BE ACCURATE DUE TO SYSTEMS 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 children's and adolescents' 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)

Request to replace computers that have obsolete operating systems or are no longer operating efficiently. Replacement is for the purchase of 83 desk top computers in FY14 only (0.00/116,200A; 0.00/0A).

C. Description of Activities Performed

Activities carried out to achieve program objectives are provided by seven branches and the central administrative office. The central office assures that the needed array of services is accessible to all eligible youth, and that these contracted services are safe, effective and provided as expected. The administration of the division oversees service evaluation, provider relations and overall management of the system. The Clinical Services Office provides system leadership for managing the utilization of services, sets service standards, and disseminates the application of effective services, as supported by existing evidence, across the state. The Performance Management Office (PMO) oversees the overall performance of the service system, and quality of services. It implements the division's credentialing, facility certification and monitoring of provider agencies. The

PMO also operates the Division's grievance system, sentinel events management system and oversees the Division Quality Assurance and Improvement Program. The Central Administrative Services manages contracts, personnel, accounting, and claims review processes. Staff in seven of the branches (Family Guidance Centers) facilitate the intake process and provide assessments and other direct services, case management, and necessary treatment services through the contracted provider network. Services are provided with the treatment goal of improving the emotional well being of the children or adolescents, while strengthening the family and the community's ability to support youth to be successful. Staff in the Family court Liaison Branch provide risk-for-harm screening, mental health assessment and direct treatment services for adolescents entering the Detention Home of Hawaii Youth Correctional Facility. The Child and Adolescent Mental Health Division (CAMHD) operates as a Medicaid carve-out for youth who meet eligibility for CAMHD services because they are seriously emotionally and behaviorally disturbed.

D. Statement of Key Policies Pursued

CAMHD maintains services under all applicable state and federal mandates. These requirements are also reflected in all contracts for service provision

E. Identification of Important Program Relationships

The Department of Education (DOE) and the CAMHD collaborate to provide a comprehensive system of education and behavioral and mental health supports and services to students who require those services to benefit from their educational opportunities.

The Department of Human Services (DHS) and CAMHD collaborate to provide behavioral health services for Med-QUEST and Medicaid Fee-For-Service youth determined to be in need of intensive mental health services.

CAMHD maintains purchase of service contracts with mental health providers statewide.

CAMHD has federal grant awards through the Substance Abuse and Mental Health Services Administration of the Department of Health and Human Services. CAMHD also collaborates with the Hawaii State Judiciary and the Office of Youth Services for indicated mental health services for youth.

F. Description of Major External Trends Affecting the Program

Major trends/factors affecting the program are: (1) social and economic conditions which create undue mental stress on families, making them less able to deal with their dependents and responsibilities resulting in an increased demand for mental health services; (2) the implementation of state legislation dealing with mental health (e.g. parity); (3) the availability of trained qualified mental health professionals; (4) the sustainability requirements of the Felix Consent Decree; (5) the Olmstead Decision; (6) criminal history checks for employees and providers; (7) DOE and Department of Health's, via CAMHD, joint responsibility for children and adolescents in public school requiring mental health services to benefit from their education; (8) CAMHD operating requirements in order to meet the expectation of providing services as a Medicaid carve-out; (9) provider costs, and (10) the availability of program services to youth aged 18 through 20 because of federal Early Periodic Screening, Diagnosis, and Treatment (EPSDT) mandates.

G. Discussion of Cost, Effectiveness and Program Size Data

Costs: In FY10, program costs were approximately \$66 million. This decrease was due to the budget cuts in the general funds. These program costs include services paid through general funds, special funds, and federal grants. Due to additional budget cuts and hiring freezes, the FY11

and FY12 program cost were about \$65 million. CAMHD is dependent upon significant reimbursement from MedQUEST to meet expense projections. At the end of FY12, all contracts with provider agencies had expired and the beginning of FY13 shows a start up of some new providers providing services, as well as a few new services. The budget cuts were very hard on some of the contracted providers and CAMHD had a loss of some services due to the funding issues. With an increase in population over FY11 and 12, CAMHD is anticipating that services will continue even though the budget for FY13 is reduced from previous years to \$61 million. CAMHD is dependent on significant Medicaid reimbursement to meet the service needs.

Effectiveness: CAMHD continues to maintain comprehensive performance indicators that are published annually. The majority of performance goals have been consistently met or exceeded. Measures that do not meet targeted performance thresholds have required the implementation of improvement strategies.

Program size data: The CAMHD experienced a decrease in registered youth over FY09 and FY10, due mostly to the reduction of funding and staff within the DOH and DHS. Near the end of FY11, CAMHD changed the registration process for the lower end youth serviced through the Mokihana Project on Kauai, which dropped the overall registered population by 500 youth, approximately 31%. At the end of FY11, CAMHD had a total registered youth of 1,117. Through various means of outreach CAMHD has increased the number of registered youth to 1235 by the end of FY12, an increase of approximately 11%. It is anticipated that this upward trend will continue, through continued outreach to programs, working closer with sister agencies, and utilization of SAMHSA grants that are allowing CAMHD to provide services to a larger population of youth, widening the eligibility requirements.



H. Discussion of Program Revenue

The program receives revenue from Medicaid (Title XIX). These reimbursements during FY11 were \$8.7 million due to changes in the reimbursement structure and CAMHD client base. Due to another restructure by Medicaid, the FY12 revenues were approximately \$6.5 million. It is anticipated that future revenues should be slightly higher, as CAMHD will be providing more direct services and DHS is allowing billing for our direct services, in addition to the contracted services.

I. Summary of Analysis Performed

None.

J. Further Consideration

None.

**OPERATING AND CAPITAL APPROPRIATIONS**

REPORT P61-A

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

PROGRAM EXPENDITURES	--IN DOLLARS--				--IN THOUSANDS--			
	FY2011-12	FY2012-13	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19
OPERATING COST	191.75*	194.75*	206.75*	206.75*	206.8*	206.8*	206.8*	206.8*
PERSONAL SERVICES	7,903,457	9,829,005	11,031,988	11,031,988	11,032	11,032	11,032	11,032
OTHER CURRENT EXPENSES	60,080,514	58,094,563	63,664,526	62,084,526	62,085	62,085	62,085	62,085
EQUIPMENT	1,258							
<b>TOTAL OPERATING COST</b>	<b>67,985,229</b>	<b>67,923,568</b>	<b>74,696,514</b>	<b>73,116,514</b>	<b>73,117</b>	<b>73,117</b>	<b>73,117</b>	<b>73,117</b>
BY MEANS OF FINANCING								
	191.75*	191.75*	203.75*	203.75*	203.8*	203.8*	203.8*	203.8*
GENERAL FUND	67,523,491	66,884,576	73,657,522	72,077,522	72,078	72,078	72,078	72,078
	*	3.00*	3.00*	3.00*	3.0*	3.0*	3.0*	3.0*
SPECIAL FUND	461,738	1,038,992	1,038,992	1,038,992	1,039	1,039	1,039	1,039
TOTAL POSITIONS	191.75*	194.75*	206.75*	206.75*	206.80*	206.80*	206.80*	206.80*
TOTAL PROGRAM COST	67,985,229	67,923,568	74,696,514	73,116,514	73,117	73,117	73,117	73,117

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

	FY 2011-12	FY 2012-13	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19
<b>MEASURES OF EFFECTIVENESS</b>								
1. % OF PERSONS RECEIVING DEVLPMNTL DISABILITIES SVCS	15	15	15	15	15	15	15	15
2. NO. PERSONS W/DD REMAINING IN INSTIT (SMALL ICF/ID)	79	80	80	80	80	80	80	80
3. NO. ADULTS CHOOSING THEIR OWN LIVING ARRANGEMENTS	2401	2401	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
<b>PROGRAM TARGET GROUPS</b>								
1. NUMBER OF PERSONS IN NEED OF DD SERVICES	3217	3250	3250	3250	3250	3250	3250	3250
2. NUMBER OF PEOPLE IN NEED OF NEUROTRAUMA SERVICES	4190	4100	575	575	575	575	575	575
<b>PROGRAM ACTIVITIES</b>								
1. NO. OF UNDUPLICATED INDIV RECVG COMMUNITY SUPPORTS	3217	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	2657	2690	2690	2690	2690	2690	2690	2690
4. NO. RESIDENTIAL CAREGIVERS CERTIFIED/RECERTIFIED	700	650	425	425	425	425	425	425
5. NUMBER OF ADULTS LIVING IN THEIR OWN HOME	170	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	750	750	750	750	750	750	750	750
8. NO. OF PERSONS RECEIVING CASE MANAGEMENT SERVICES	3217	3250	3250	3250	3250	3250	3250	3250
9. # PERSONS IN HSH RECEIVING DENTAL TREATMENT	251	248	248	248	248	248	248	248
10. #PERSONS RECEIVING DENTAL TREATMENT AT DOH CLINICS	1791	1800	1800	1800	1800	1800	1800	1800
<b>PROGRAM REVENUES BY TYPE (IN THOUSANDS of DOLLARS)</b>								
CHARGES FOR CURRENT SERVICES	1,238	1,250	1,250	1,250	1,250	1,250	1,250	1,250
TOTAL PROGRAM REVENUES	1,238	1,250	1,250	1,250	1,250	1,250	1,250	1,250
<b>PROGRAM REVENUES BY FUND (IN THOUSANDS of DOLLARS)</b>								
GENERAL FUNDS	409	400	400	400	400	400	400	400
SPECIAL FUNDS	829	850	850	850	850	850	850	850
TOTAL PROGRAM REVENUES	1,238	1,250	1,250	1,250	1,250	1,250	1,250	1,250

NOTE: PROGRAM REVENUES BY TYPE AND FUND MAY NOT BE ACCURATE DUE TO SYSTEMS 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)

1. Transfer in Position count and funding from Hospital and Community Dental Services (HTH 141/ED) as part of Program Review Adjustment to abolish HTH 141, (11.00/830,399A, 11.00/830,399A).
2. Transfer in Dental Assistant and contract funding from Dental Health Administration (HTH 141/EE) as part of Program Review Adjustment to abolish HTH 141, (1.00/331,583A; 1.00/331,583A).
3. Add General Funds for the State Match for the Home and Communities Based Services Waiver, (0.00/2,683,384A; 0.00/2,683,384A).
4. Add General Funds for State Match for Intermediate Care Facilities, (0.00/704,504A; 0.00/704,504A).
5. Add General Funds for Fiscal Agent to process Medicaid Service Provider Claims, (0.00/290,000A; 0.00/290,000A).
6. Add General Funds for Electronic Health Record System for record keeping, claims processing and reports to the Centers for Medicare and Medicaid Services (CMS), (0.00/1,580,000A; 0.00/0A).

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

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

3. Dental Services

- Evaluates new methods for the prevention and control of dental diseases and considers implementation as part of public health programming;
- 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

- 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.
- The federal Center for Medicare/Medicaid Services (CMS) now requires Medicaid funded programs to implement robust quality assurance programs.
- 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

- The program receives Medicaid reimbursements for targeted case management services.
- The Neurotrauma special fund is supported by traffic violation fines and is used to support educational and informational activities.
- 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			
	FY2011-12	FY2012-13	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19
OPERATING COST	57.50*	57.50*	57.50*	57.50*	57.5*	57.5*	57.5*	57.5*
PERSONAL SERVICES	5,725,058	6,237,678	5,404,479	5,404,479	5,404	5,404	5,404	5,404
OTHER CURRENT EXPENSES	3,050,792	3,964,075	2,592,907	2,592,907	2,593	2,593	2,593	2,593
<b>TOTAL OPERATING COST</b>	<b>8,775,850</b>	<b>10,201,753</b>	<b>7,997,386</b>	<b>7,997,386</b>	<b>7,997</b>	<b>7,997</b>	<b>7,997</b>	<b>7,997</b>
BY MEANS OF FINANCING								
GENERAL FUND	57.50*	57.50*	57.50*	57.50*	57.5*	57.5*	57.5*	57.5*
5,582,379	6,690,791	6,760,523	6,760,523	6,760	6,760	6,760	6,760	
FEDERAL FUNDS	*	*	*	*	*	*	*	*
3,193,471	3,510,962							
OTHER FEDERAL FUNDS	*	*			*	*	*	*
1,236,863		1,236,863	1,236,863	1,237	1,237	1,237	1,237	
<b>TOTAL POSITIONS</b>	<b>57.50*</b>	<b>57.50*</b>	<b>57.50*</b>	<b>57.50*</b>	<b>57.50*</b>	<b>57.50*</b>	<b>57.50*</b>	<b>57.50*</b>
<b>TOTAL PROGRAM COST</b>	<b>8,775,850</b>	<b>10,201,753</b>	<b>7,997,386</b>	<b>7,997,386</b>	<b>7,997</b>	<b>7,997</b>	<b>7,997</b>	<b>7,997</b>

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

	FY 2011-12	FY 2012-13	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19
<b>MEASURES OF EFFECTIVENESS</b>								
1. % PURCHASE-OF-SERVICE PROGRAMS MONITORED	100	100	100	100	100	100	100	100
2. % OF GRANTS APPLIED FOR AND OBTAINED	0	50	50	50	50	50	50	50
<b>PROGRAM TARGET GROUPS</b>								
1. RESIDENT POPULATION	1374810	1385800	1396900	1408000	1419300	1430600	1442100	1453600
2. # PURCHASE-OF-SERVICE PROVIDERS	64	67	69	71	72	73	74	75
<b>PROGRAM ACTIVITIES</b>								
1. # PURCHASE-OF-SERVICE PROGRAMS TO BE MONITORED	64	67	69	71	72	73	74	75
2. # OF GRANT APPLICATIONS SUBMITTED	0	2	2	2	2	2	2	2
<b>PROGRAM REVENUES BY TYPE (IN THOUSANDS of DOLLARS)</b>								
REVENUE FROM OTHER AGENCIES: FEDERAL	862	862	732	731				
TOTAL PROGRAM REVENUES	862	862	732	731				
<b>PROGRAM REVENUES BY FUND (IN THOUSANDS of DOLLARS)</b>								
SPECIAL FUNDS	862	862	732	731				
TOTAL PROGRAM REVENUES	862	862	732	731				

NOTE: PROGRAM REVENUES BY TYPE AND FUND MAY NOT BE ACCURATE DUE TO SYSTEMS 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. Transfer out 1.00 temporary FTE and funds for the Principal Investigator for the Hawaii Multicultural Action Initiative Grant to HTH 907/AP (0.00/-121,668 A; 0.00/-121,668 A).
2. Transfer out federal funds for the Hawaii Multicultural Action Initiative Grant to HTH907/AP (0.00/-130,000 P; 0.00/-130,000 P).
3. Reduce 13.00 temporary FTE and funds due to the conclusion of the Mental Health Transformation State Incentive Grant (0.00/-2,190,500 N; 0.00/-2,190,500 N).

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--			
	FY2011-12	FY2012-13	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19
OPERATING COST	118.00*	116.00*	129.00*	132.00*	132.0*	132.0*	132.0*	132.0*
PERSONAL SERVICES	6,316,124	5,981,430	6,526,168	6,932,041	6,932	6,932	6,932	6,932
OTHER CURRENT EXPENSES	1,124,503	1,189,503	1,205,667	1,211,667	1,211	1,211	1,211	1,211
EQUIPMENT	183,200	213,200	230,700	223,700	224	224	224	224
MOTOR VEHICLE	55,000							
<b>TOTAL OPERATING COST</b>	<b>7,678,827</b>	<b>7,384,133</b>	<b>7,962,535</b>	<b>8,367,408</b>	<b>8,367</b>	<b>8,367</b>	<b>8,367</b>	<b>8,367</b>
<b>BY MEANS OF FINANCING</b>								
GENERAL FUND	98.00*	96.00*	104.00*	104.00*	104.0*	104.0*	104.0*	104.0*
5,652,031	5,652,031	5,364,482	5,671,968	5,819,808	5,820	5,820	5,820	5,820
13.00*	13.00*	13.00*	18.00*	21.00*	21.0*	21.0*	21.0*	21.0*
SPECIAL FUND	1,376,633	1,389,351	1,640,404	1,897,437	1,897	1,897	1,897	1,897
6.00*	6.00*	2.00*	2.00*	2.0*	2.0*	2.0*	2.0*	2.0*
FEDERAL FUNDS	594,682	577,269	67,711	67,711	68	68	68	68
*	*	4.00*	4.00*	4.0*	4.0*	4.0*	4.0*	4.0*
OTHER FEDERAL FUNDS	1.00*	1.00*	526,971	526,971	527	527	527	527
INTERDEPT. TRANSFER	55,481	53,031	55,481	55,481	55	55	55	55
<b>TOTAL POSITIONS</b>	<b>118.00*</b>	<b>116.00*</b>	<b>129.00*</b>	<b>132.00*</b>	<b>132.00*</b>	<b>132.00*</b>	<b>132.00*</b>	<b>132.00*</b>
<b>TOTAL PROGRAM COST</b>	<b>7,678,827</b>	<b>7,384,133</b>	<b>7,962,535</b>	<b>8,367,408</b>	<b>8,367</b>	<b>8,367</b>	<b>8,367</b>	<b>8,367</b>

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

	FY 2011-12	FY 2012-13	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19
<b>MEASURES OF EFFECTIVENESS</b>								
1. % OF SCHOOLS IN COMPLIANCE WITH AHERA (IRH)	98	95	95	95	95	95	95	95
2. % OF ADULTERATION/MISBRANDING VIOLATIONS (F&D)	30	60	60	60	60	60	60	60
3. % FD FIRMS RECEIVED & REMOVED RECALL PRODUCTS (FD)	33	30	30	30	30	30	30	30
4. % FD EST NO MORE THAN 1 MAJ VIOLATION / INSPECT	28	25	30	35	45	65	75	80
5. % OF FOOD PRODUCTS ANALYZED NOT ADULTERATED (F&D)	71	95	95	95	95	95	95	95
6. % FOODBORNE ILLNESS INVEST/RESPOND BY 24 HR (SAN)	93	90	90	90	90	90	90	90
7. % MAJOR FOOD VIOLATIONS CORRECTED WITHIN 1 WK (SAN)	83	90	90	90	90	90	90	90
8. PERCENT OF NOISE PERMITS IN COMPLIANCE (IRH)	98	99	99	99	99	99	99	99
9. % OF RADIATION FACILITIES IN COMPLIANCE (IRH)	64	60	60	60	60	60	60	60
10. % SANITATION COMPLTS RESPONDED WITHIN 2 DAYS (SAN)	90	90	90	90	90	90	90	90
<b>PROGRAM TARGET GROUPS</b>								
1. # SCHLS REQUIRED TO IMPLMT ASBESTOS MGT PLAN (IRH)	433	440	440	440	440	440	440	440
2. # OF VIOLATIONS ISSUED FROM FD INSPECTIONS (FD)	965	1300	1300	1300	1300	1300	1300	1300
3. # F&D RECALLS THAT AFFECTED HAWAII (F&D)	38	35	35	35	35	35	35	35
4. # OF FOODBORNE ILLNESS COMPLAINTS RECEIVED (SAN)	247	240	240	240	240	240	240	240
5. NUMBER OF FOOD PRODUCTS SAMPLED (F&D)	287	225	225	225	225	225	225	225
6. # OF FOOD SERVICE ESTABLISHMENTS (SAN)	10044	10100	10100	10100	10100	10100	10100	10100
7. NUMBER OF SANITATION COMPLAINTS RECEIVED (SAN)	1893	2000	2000	2000	2000	2000	2000	2000
8. NUMBER OF NOISE PERMITS ISSUED (IRH)	501	500	500	500	500	500	500	500
9. NUMBER OF RADIATION FACILITIES (IRH)	1114	1120	1120	1120	1120	1120	1120	1120
10. # OF MAJOR VIOLATIONS CITED ROUTINE INSPECT (SAN)	3636	3700	3700	3700	3700	3700	3700	3700
<b>PROGRAM ACTIVITIES</b>								
1. NUMBER OF INSPECTIONS OF AHERA SOURCES (IRH)	92	90	90	90	90	90	90	90
2. # ADULTERATION/MISBRANDING VIOLATIONS ISSUED (FD)	890	850	850	850	850	850	850	850
3. # F&D FIRMS INSPECTED FOR RECALLED PRODUCTS (F&D)	78	200	200	200	200	200	200	200
4. # OF ROUTINE INSPECTIONS OF FOOD SERVICE EST (SAN)	6097	6300	6300	6300	6300	6300	6300	6300
5. NUMBER OF FOOD PRODUCTS ANALYZED (F&D)	287	200	200	200	200	200	200	200
6. # FOODBORNE ILLNESS COMPLAINT INVESTIGATIONS (SAN)	247	225	200	200	200	200	200	200
7. NO. OF SANITATION COMPLAINTS INVESTIGATED (SAN)	1812	1800	1800	1800	1800	1800	1800	1800
8. NUMBER OF NOISE PERMIT INSPECTIONS (IRH)	686	600	600	600	600	600	600	600
9. NO. OF INSPECTIONS OF RADIATION FACILITIES (IRH)	223	225	225	225	225	225	225	225
10. # OF MAJOR VIOLATIONS CORRECTED (SAN)	3143	3700	2700	2000	2000	2000	2000	2000
<b>PROGRAM REVENUES BY TYPE (IN THOUSANDS of DOLLARS)</b>								
LICENSES, PERMITS, AND FEES	675	1,911	1,911	1,911	1,911	1,911	1,911	1,911
REVENUES FROM THE USE OF MONEY AND PROPERTY	6	6	6	6	6	6	6	6
REVENUE FROM OTHER AGENCIES: FEDERAL	357	357	357	357	357	357	357	357
CHARGES FOR CURRENT SERVICES	337	331	337	331	331	331	331	331
FINES, FORFEITS AND PENALTIES	1,056	12	12	12	12	12	12	12
NON-REVENUE RECEIPTS	55							
<b>TOTAL PROGRAM REVENUES</b>	<b>2,486</b>	<b>2,617</b>	<b>2,623</b>	<b>2,617</b>	<b>2,617</b>	<b>2,617</b>	<b>2,617</b>	<b>2,617</b>
<b>PROGRAM REVENUES BY FUND (IN THOUSANDS of DOLLARS)</b>								
GENERAL FUNDS	1,054	11	11	11	11	11	11	11
SPECIAL FUNDS	1,375	2,604	2,610	2,604	2,604	2,604	2,604	2,604
ALL OTHER FUNDS	57	2	2	2	2	2	2	2
<b>TOTAL PROGRAM REVENUES</b>	<b>2,486</b>	<b>2,617</b>	<b>2,623</b>	<b>2,617</b>	<b>2,617</b>	<b>2,617</b>	<b>2,617</b>	<b>2,617</b>

NOTE: PROGRAM REVENUES BY TYPE AND FUND MAY NOT BE ACCURATE DUE TO SYSTEMS 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)

1. Delete position and funds for temporary Environmental Health Specialist IV general funded position that was abolished in 2010. (-1.00/-22,851 A; -1.00/-22,851 A)
2. Establish eight (8.0) Vector Control Worker positions for Oahu (4.0), Maui (2.0), Hilo (1.0), and Kona (1.0) to perform surveillance at State ports of entry. (8.00/147,840 A; 8.00/295,680 A)
3. Improve food sanitation health services by increasing the budget ceiling of the Sanitation and Environmental Health Special Fund from \$890,877 to \$1,500,000 in order to fully utilize revenues to establish eight (8.00) Sanitarian positions, five (5.00) in FY 14 and three (3.00) more in FY 15; and continue implementation of the electronic food inspection/permitting database system. (5.00/223,771 B; 8.00/480,804 B)
4. Delete two federal funded temporary Environmental Health Specialist III's that no longer have grant funding. (-2.00/0 P; -2.00/0 P)

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.

2. Inspection: Perform inspections of food service, food establishments, radiation resources, chronic vector breeding sources, public and private dwellings, mortuaries, cemeteries, 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.
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 to increase their awareness of the control of litter and their 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 made and given 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 Relationships1. 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 and asbestos. Radiological regulation and disaster preparedness involve working with many state and federal agencies, including State Civil Defense.

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 from abroad 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 fees collected for registration, examination, and licensing of embalmers, funeral establishments, tattoo artists, tattoo shops, and Registered Sanitarians; permits for food establishments, temporary food establishments, and plan review; and from fines for violations of State Administrative Rules. The receipts from these activities are deposited into the Environmental Health Education Fund with any amount in excess of \$300,000 on June 30<sup>th</sup> of each year deposited into the State General Fund.

Operating funds are also received from the State Department of Transportation to finance rodent control services at the Honolulu Harbor Complex. Occasionally, federal funds are made available by the U.S. Food and Drug Administration and the U.S. Environmental Protection Agency for special studies. Homeland Security provided grants for radiation response equipment.

Act 311/SLH 1998 established the Noise, Radiation, and Indoor Air Quality Special Fund into which fees for permits and variances per Chapters 342F-14, 466J-4, and 466J-5 shall now be deposited effective July 1, 1998.

I. Summary of Analysis Performed – Not applicable.

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--			
	FY2011-12	FY2012-13	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19
OPERATING COST	72.00*	72.00*	72.00*	72.00*	72.0*	72.0*	72.0*	72.0*
PERSONAL SERVICES	3,526,291	3,888,405	4,038,504	4,038,504	4,039	4,039	4,039	4,039
OTHER CURRENT EXPENSES	2,685,719	2,539,417	3,284,417	3,302,417	3,302	3,302	3,302	3,302
EQUIPMENT	18,872		256,240	211,040	211	211	211	211
TOTAL OPERATING COST	6,230,882	6,427,822	7,579,161	7,551,961	7,552	7,552	7,552	7,552
BY MEANS OF FINANCING	72.00*	72.00*	72.00*	72.00*	72.0*	72.0*	72.0*	72.0*
GENERAL FUND	5,833,821	5,941,588	7,081,798	7,054,598	7,055	7,055	7,055	7,055
FEDERAL FUNDS	397,061	486,234	11,129	11,129	11	11	11	11
OTHER FEDERAL FUNDS	*	*	486,234	486,234	486	486	486	486
FEDERAL STIMULUS FUNDS	*	*						
TOTAL POSITIONS	72.00*	72.00*	72.00*	72.00*	72.00*	72.00*	72.00*	72.00*
TOTAL PROGRAM COST	6,230,882	6,427,822	7,579,161	7,551,961	7,552	7,552	7,552	7,552

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

	FY 2011-12	FY 2012-13	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19
<b>MEASURES OF EFFECTIVENESS</b>								
1. PERCENTAGE OF FALSE POSITIVE LAB TEST RESULTS	0	0	0	0	0	0	0	0
2. PERCENTAGE OF FALSE NEGATIVE LAB TEST RESULTS	0	0	0	0	0	0	0	0
3. PERCENTAGE OF REQUESTS FOR SERVICES MET	99	99	99	99	99	99	99	99
4. % PROFICIENCY TESTS PERFRMD MEETG PROFICIENCY STDS	100	100	100	100	100	100	100	100
<b>PROGRAM TARGET GROUPS</b>								
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. NO. CLINICAL LAB PERSONNEL APPLYING FOR LICENSURE	119	90	90	90	90	90	90	90
4. NUMBER OF LICENSED CLINICAL LABORATORY PERSONNEL	1415	1425	1500	1500	1500	1500	1500	1500
5. NO. OF LABS PERFORMING CLINICAL DIAGNOSTIC TESTING	764	764	800	800	800	800	800	800
6. NO. OF LABS PERFORMING SUBSTANCE ABUSE TESTING	2	2	2	2	2	2	2	2
7. NO. OF LABS PERFORMING ENVIRONMENTAL TESTING	18	19	19	19	19	19	19	19
<b>PROGRAM ACTIVITIES</b>								
1. DRINKING WATER (WORK TIME UNITS)	260826	475000	411000	411000	411000	411000	411000	411000
2. WATER POLLUTION (WORK TIME UNITS)	118875	240000	245000	245000	245000	245000	245000	245000
3. SEXUALLY TRANSMITTED DISEASE (WORK TIME UNITS)	194432	305000	272000	272000	272000	272000	272000	272000
4. TUBERCULOSIS (WORK TIME UNITS)	70000	145000	2500	2500	2500	2500	2500	2500
5. OTHER COMMUNICABLE DISEASES (WORK TIME UNITS)	313850	854000	531000	531000	531000	531000	531000	531000
6. FOOD AND DRUGS (WORK TIME UNITS)	211348	325000	243000	243000	243000	243000	243000	243000
7. AIR POLLUTION (WORK TIME UNITS)	652575	908650	699000	699000	699000	699000	699000	699000
8. NUMBER OF LABORATORY INSPECTIONS	12	15	15	15	15	15	15	15
9. NO. OF LAB PERSONNEL RECEIVING FORMAL LAB TRAINING	105	108	108	108	108	108	108	108
<b>PROGRAM REVENUES BY TYPE (IN THOUSANDS of DOLLARS)</b>								
LICENSES, PERMITS, AND FEES		2	2	2	2	2	2	2
REVENUE FROM OTHER AGENCIES: FEDERAL	370	370	370	370	370	370	370	370
CHARGES FOR CURRENT SERVICES		40		40		40		40
TOTAL PROGRAM REVENUES	370	412	372	412	372	412	372	412
<b>PROGRAM REVENUES BY FUND (IN THOUSANDS of DOLLARS)</b>								
SPECIAL FUNDS	370	412	372	412	372	412	372	412
TOTAL PROGRAM REVENUES	370	412	372	412	372	412	372	412

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

A. Statement of Program Objective

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 Requests and Compliance with Section 37-68(1) (A) (B)

1. An increase in the appropriation for electricity so that the budget more closely matches the cost; The cost of electricity has risen as follows: 28.01% in FY12, 19.03% in FY11 and 34.58% in FY10. In contrast, the consumption of electricity has been as follows: +1.25% in FY12, -6.79% in FY11 and -6.7% in FY10. The request is, thus, based on the increase in the uncontrolled cost of electricity rather than consumption. The Division's budget for electricity has been flat since FY10. (0.00/730,000A; 0.00/730,000A)
2. Operating supplies and equipment are requested for the revived shellfish program Without evaluation and analyses by the State Laboratories Division, the local industry will not be able to determine requisite product safety to bring it to market. (0.00/41,240A; 0.00/26,040A)
3. Funds to purchase a gas-chromatograph mass spectrometer for food safety testing are requested. The gas-chromatograph mass spectrometer will replace several obsolete instruments that are used to detect illegal herbicides and pesticides in food. (0.00/230,000A; 0.00/18,000A)
4. Funds to purchase a MALDI-TOF mass spectrometer for microbial identifications in FY15. The Matrix Assisted Laser Desorption Ionization – Time of Flight (MALDI-TOF) mass spectrometer identifies bacterial causes of outbreaks in minutes, rather than days, and will dramatically improve the efficacy of the SLD to protect the community. (0.00/0A; 0.00/200,000A)

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 to state and federal programs, as well as community and regional entities.
3. Provide microbiological and chemical analysis of food in support of regulatory monitoring and food borne disease outbreak investigations.
4. In collaboration with the National Laboratory Training Network of the Association of Public Health Laboratories, the Centers for Disease Control and Prevention, and others, provide laboratory training in bioterrorism, clinical, public health, and environmental analyses. In collaboration with the University of Hawaii system, provide laboratory training for students enrolled in graduate school, medical technology, and medical laboratory technician programs. Provide one-on-one training in drinking water and water pollution analyses to private and other government laboratories.
5. Provide consultative services to the Environmental Health programs in formulating amendments to Hawaii Administrative Rules (HAR) relating to potable water and water quality standards.
6. Certify laboratories that perform compliance work for the analyses of drinking water, shellfish, and milk; and drinking water purveyors that perform compliance tests for residual chlorine and turbidity.
7. License clinical laboratory personnel, substance abuse testing laboratories, medical review officers, and personnel performing blood alcohol measurements.
8. Administer the statutory statewide program relating to chemical testing of blood alcohol concentrations for DUI cases.



9. 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

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.

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

Increased 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 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.) which may also increase costs.

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

Operation of the state-of-the-art main laboratory facility in Pearl City is expensive; however, ongoing incorporation of energy efficient modifications has already saved about 13% on consumption. There are neighbor island laboratories located in Hawaii, Maui, and Kauai. In spite of personnel, procurement, and budget restrictions, the State Laboratory Services program constantly strives to meet or exceed the environmental and public health analytical needs of the State.

H. Discussion of Program Revenue

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

None

**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			
	FY2011-12	FY2012-13	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19
OPERATING COST	40.80*	40.80*	38.80*	39.80*	39.8*	39.8*	39.8*	39.8*
PERSONAL SERVICES	2,524,387	2,400,955	2,893,534	2,918,878	2,919	2,919	2,919	2,919
OTHER CURRENT EXPENSES	1,049,261	1,049,261	1,007,215	1,462,977	1,463	1,463	1,463	1,463
<b>TOTAL OPERATING COST</b>	<b>3,573,648</b>	<b>3,450,216</b>	<b>3,900,749</b>	<b>4,381,855</b>	<b>4,382</b>	<b>4,382</b>	<b>4,382</b>	<b>4,382</b>
BY MEANS OF FINANCING								
GENERAL FUND	20.90*	20.90*	23.90*	24.90*	24.9*	24.9*	24.9*	24.9*
SPECIAL FUND	1,508,133	1,457,829	1,677,331	2,158,437	2,158	2,158	2,158	2,158
FEDERAL FUNDS	406,000	406,000	406,000	406,000	406	406	406	406
OTHER FEDERAL FUNDS	19.90*	19.90*	*	*	*	*	*	*
TOTAL FEDERAL FUNDS	1,659,515	1,586,387	73,128	73,128	73	73	73	73
TOTAL OTHER FEDERAL FUNDS	*	*	14.90*	14.90*	14.9*	14.9*	14.9*	14.9*
TOTAL OTHER FEDERAL FUNDS			1,744,290	1,744,290	1,745	1,745	1,745	1,745
<b>TOTAL POSITIONS</b>	<b>40.80*</b>	<b>40.80*</b>	<b>38.80*</b>	<b>39.80*</b>	<b>39.80*</b>	<b>39.80*</b>	<b>39.80*</b>	<b>39.80*</b>
<b>TOTAL PROGRAM COST</b>	<b>3,573,648</b>	<b>3,450,216</b>	<b>3,900,749</b>	<b>4,381,855</b>	<b>4,382</b>	<b>4,382</b>	<b>4,382</b>	<b>4,382</b>

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

	FY 2011-12	FY 2012-13	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19
<b>MEASURES OF EFFECTIVENESS</b>								
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	100	100	100	100	100	100	100	100
<b>PROGRAM TARGET GROUPS</b>								
1. HOSPITALS	27	27	27	27	27	27	27	27
2. NURSING HOMES (SKILLED AND INTERMEDIATE)	50	50	50	50	50	50	50	50
3. ADULT RESIDENTIAL/FOSTER/COMMUNITY HOMES/DAY CARE	506	506	506	506	506	506	506	506
4. SPECIAL TREATMENT FAC/THERAPEUTIC LIVING PROGRAMS	43	43	43	43	43	43	43	43
5. INTERMEDIATE CARE FACILITIES/MENTALLY RETARDED	18	18	18	18	18	18	18	18
6. CLINICAL LABORATORIES/DIETICIANS	782	782	782	782	782	782	782	782
7. END STAGE RENAL DIALYSIS UNITS	22	22	22	22	22	22	22	22
8. DEVELOPMENTAL DISABILITIES DOMICILIARY HOMES	39	39	39	39	39	39	39	39
9. HOME HEALTH/CARE MGMT/CARE AGENCIES	12	17	17	17	17	17	17	17
10. ASSISTED LIVING FACILITIES	12	12	12	12	12	12	12	12
<b>PROGRAM ACTIVITIES</b>								
1. HOSPITAL LICENSING AND COMPLIANCE VISITS	15	15	15	15	15	15	15	15
2. NURSING HOMES LICENSING AND COMPLIANCE VISITS	52	100	100	100	100	100	100	100
3. CARE FACIL/FOSTER LICENSING AND COMPLIANCE VISITS	997	1012	1012	1012	1012	1012	1012	1012
4. SPEC TREATMT FAC/THERA LVG PROG LIC & COMPL VISITS	43	43	43	43	43	43	43	43
5. ICF/MENTALLY RETARDD LICENSING & COMPLIANCE VISITS	18	50	50	50	50	50	50	50
6. CLINICAL LABS/DIETIC LICENSING & COMPLIANCE VISITS	50	50	50	50	50	50	50	50
7. ASSTD LVG FACILITIES LICENSING & COMPLIANCE VISITS	4	7	7	7	7	7	7	7
8. DD DOMICILIARY HOMES LICENSING & COMPLIANCE VISITS	39	39	39	39	39	39	39	39
9. HOME HEALTH AGENCIES LICENSING & COMPLIANCE VISITS	10	20	20	20	20	20	20	20
10. ENFORCEMENT ACTIVITIES FOR UNLICENSED FACIL & SVCS	7	7	7	7	7	7	7	7
<b>PROGRAM REVENUES BY TYPE (IN THOUSANDS of DOLLARS)</b>								
REVENUE FROM OTHER AGENCIES: FEDERAL	1,801	1,855	1,856	1,856	1,855	1,855	1,855	1,855
TOTAL PROGRAM REVENUES	1,801	1,855	1,856	1,856	1,855	1,855	1,855	1,855
<b>PROGRAM REVENUES BY FUND (IN THOUSANDS of DOLLARS)</b>								
SPECIAL FUNDS	1,801	1,855	1,856	1,856	1,855	1,855	1,855	1,855
TOTAL PROGRAM REVENUES	1,801	1,855	1,856	1,856	1,855	1,855	1,855	1,855

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

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

The budget includes the following:

1. Request for one Registered Nurse IV position for the licensing section to accommodate the expected workload relative to the transfer of licensing responsibility from DHS to DOH for Community Care Adult Foster Family Home, Adult Day Care programs, and Case Management Agencies and the associated equipment, workstation, and operating expenses in accordance with Act 093 SLH12, Governor's Message 1194. (0.00/0A; 1.00/481,106A)
2. Housekeeping measure to more accurately reflect in the budget the federal/general fund salary split for the positions that serve as critical resources for the department to comply with the Federal 1864 Agreement with the Federal Centers for Medicare and Medicaid Services (CMS). (-5.00/157,903P; -5.00/157,903P), (3.00/169,198A; 3.00/169,198A)

**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 programs 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 do the survey and certification activities based on Federal regulations 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.

**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.

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 is also preparing to assume the responsibility from DHS of licensing the adult foster family community care 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

H. 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 FY14 and FY15.

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 FY13.

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			
	FY2011-12	FY2012-13	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19
OPERATING COST	8.00*	8.00*	8.00*	8.00*	8.0*	8.0*	8.0*	8.0*
PERSONAL SERVICES	476,536	461,322	476,536	476,536	477	477	477	477
OTHER CURRENT EXPENSES	146,278	146,278	146,278	146,278	146	146	146	146
TOTAL OPERATING COST	622,814	607,600	622,814	622,814	623	623	623	623
BY MEANS OF FINANCING	8.00*	8.00*	8.00*	8.00*	8.0*	8.0*	8.0*	8.0*
GENERAL FUND	508,814	493,600	508,814	508,814	509	509	509	509
SPECIAL FUND	114,000	114,000	114,000	114,000	114	114	114	114
TOTAL POSITIONS	8.00*	8.00*	8.00*	8.00*	8.00*	8.00*	8.00*	8.00*
TOTAL PROGRAM COST	622,814	607,600	622,814	622,814	623	623	623	623

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

	FY 2011-12	FY 2012-13	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19
<b>MEASURES OF EFFECTIVENESS</b>								
1. % CERTIF OF NEED APPL DOCUMNTNG 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	2	2	2	2	2	2	2	2
<b>PROGRAM TARGET GROUPS</b>								
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
<b>PROGRAM ACTIVITIES</b>								
1. PLNNG, RESEARCH & REVIEW ACTIV (PROF PERSON DAYS)	244	790	790	790	790	790	790	790
2. DATA MANAGEMENT ACTIVITIES (PROF PERSON DAYS)	12	212	212	212	212	212	212	212
3. HSHCC & SAC SUPPORT & TRAINING (PROF PERSON DAYS)	225	225	225	225	225	225	225	225
<b>PROGRAM REVENUES BY TYPE (IN THOUSANDS of DOLLARS)</b>								
REVENUES FROM THE USE OF MONEY AND PROPERTY				5	5	5	5	5
CHARGES FOR CURRENT SERVICES	55	55	55	55	130	130	130	130
TOTAL PROGRAM REVENUES	55	55	55	60	135	135	135	135
<b>PROGRAM REVENUES BY FUND (IN THOUSANDS of DOLLARS)</b>								
SPECIAL FUNDS	55	55	55	60	135	135	135	135
TOTAL PROGRAM REVENUES	55	55	55	60	135	135	135	135

NOTE: PROGRAM REVENUES BY TYPE AND FUND MAY NOT BE ACCURATE DUE TO SYSTEMS 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 administers.
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, which is produced in-house, 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 eight, has produced meaningful outcomes for Hawaii's fourth largest private industry, health care. However, three of the eight staff positions remains unfilled and are critical to meeting the Agency's mandated responsibilities. Fortunately, the Agency is able to manage the review time of certificate of need applications within the statutory required response time 100% of the time. Secondly, the Agency's periodic revisions of the HSFP or the engagement in projects that fulfill statewide and regional priorities are supported by the

development of collaborative partnerships with the private health industry and other community groups, 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 the total project costs. Due to an economic downturn and budget restrictions, 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--			
	FY2011-12	FY2012-13	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19
OPERATING COST	33.50*	33.50*	37.50*	37.50*	37.5*	37.5*	37.5*	37.5*
PERSONAL SERVICES	1,425,471	1,622,289	1,715,970	1,748,338	1,748	1,748	1,748	1,748
OTHER CURRENT EXPENSES	428,607	543,729	624,733	621,613	622	622	622	622
<b>TOTAL OPERATING COST</b>	<b>1,854,078</b>	<b>2,166,018</b>	<b>2,340,703</b>	<b>2,369,951</b>	<b>2,370</b>	<b>2,370</b>	<b>2,370</b>	<b>2,370</b>
BY MEANS OF FINANCING	29.50*	29.50*	32.50*	32.50*	32.5*	32.5*	32.5*	32.5*
GENERAL FUND	1,299,174	1,364,867	1,410,190	1,410,190	1,410	1,410	1,410	1,410
SPECIAL FUND	308,208	583,608	695,643	724,891	725	725	725	725
FEDERAL FUNDS	246,696	217,543						
OTHER FEDERAL FUNDS			234,870	234,870	235	235	235	235
<b>TOTAL POSITIONS</b>	<b>33.50*</b>	<b>33.50*</b>	<b>37.50*</b>	<b>37.50*</b>	<b>37.50*</b>	<b>37.50*</b>	<b>37.50*</b>	<b>37.50*</b>
<b>TOTAL PROGRAM COST</b>	<b>1,854,078</b>	<b>2,166,018</b>	<b>2,340,703</b>	<b>2,369,951</b>	<b>2,370</b>	<b>2,370</b>	<b>2,370</b>	<b>2,370</b>

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

	FY 2011-12	FY 2012-13	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19
<b>MEASURES OF EFFECTIVENESS</b>								
1. % VITAL RECORDS ISSUED WITHIN 10 DAYS FROM REQUEST	64	75	75	75	75	75	75	75
2. % OF INTERVIEWS COMPLETED (SURVEY EFFICIENCY)	50	50	50	50	50	50	50	50
3. % TARGETED RESEARCH OR STATISTICS REPORTS DISSEM	80	80	80	80	80	80	80	80
<b>PROGRAM TARGET GROUPS</b>								
1. DEPARTMENT OF HEALTH PROGRAMS	87	87	87	87	87	87	87	87
2. HAWAIIANS AND OTHER ETHNIC GROUPS	1360301	1360000	1380000	1400000	1420000	1440000	1460000	1480000
3. VITAL EVENT REGISTRANTS	78929	78000	80000	80000	80000	80000	80000	80000
4. RESIDENT NON-INSTITUTIONALIZED POPULATN HOUSEHOLDS	455338	455000	456000	456000	456000	456000	456000	456000
5. ADULT POPULATION 18 AND OVER	1056483	1056000	1070000	1080000	1090000	1100000	1110000	1120000
<b>PROGRAM ACTIVITIES</b>								
1. NO. OF MAJOR HEALTH STATISTICS REQUESTS FULFILLED	90	90	90	90	90	90	90	90
2. NUMBER OF HOUSEHOLDS INTERVIEWED IN HEALTH SURVEY	6000	2400	2400	2400	2400	2400	2400	2400
3. NUMBER OF VITAL EVENTS REGISTERED	54002	55000	57000	57000	57000	57000	57000	57000
4. NUMBER OF VITAL RECORD CERTIFICATES ISSUED	285009	280000	290000	300000	300000	300000	300000	300000
5. NO. NEW DATA SETS/STAT ITEMS DISSEM ELECTRONICALLY	6	6	6	6	6	6	6	6
<b>PROGRAM REVENUES BY TYPE (IN THOUSANDS of DOLLARS)</b>								
LICENSES, PERMITS, AND FEES	840	826	826	826	826	826	826	826
REVENUE FROM OTHER AGENCIES: FEDERAL	150	150	150	150	150	150	150	150
CHARGES FOR CURRENT SERVICES	987	905	905	905	905	905	905	905
TOTAL PROGRAM REVENUES	1,957	1,881	1,881	1,881	1,881	1,881	1,881	1,881
<b>PROGRAM REVENUES BY FUND (IN THOUSANDS of DOLLARS)</b>								
GENERAL FUNDS	1,507	1,431	1,431	1,431	1,431	1,431	1,431	1,431
SPECIAL FUNDS	450	450	450	450	450	450	450	450
TOTAL PROGRAM REVENUES	1,957	1,881	1,881	1,881	1,881	1,881	1,881	1,881

NOTE: PROGRAM REVENUES BY TYPE AND FUND MAY NOT BE ACCURATE DUE TO SYSTEMS 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)

Add 1.00 perm Public Health Administrative Officer IV to coordinate fiscal, budget, and human resource requirements for the program (1.00/35,488B; 1.00/64,736B).

Convert from temp to perm 2.00 OA IV (#120381, #120383), 1.00 OA III (#120384) in Vital Records to enhance recruitment/retention efforts and accurately reflect permanent function of each position (3.00/OA; 3.00/OA).

Change MOF for 1.00 perm Research Statistician IV (#50197) from Federal-Vital Statistics Coop Program (VSCP) to Special-Vital Statistics Improvement Special Fund (VSISF) to provide a more stable funding stream. Redirect the Federal-VSCP funding from Personal Services to Other Current Expenses (-1.00/0P; -1.00/0P); (1.00/72,884B; 1.00/72,884B).

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 and Department of Health and Human Services (DHHS).

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 \$285,500 in FY 2012 for the Vital Statistics Improvement Special Fund.
2. Approximately \$200,000 per year is received in contracts and grants from the federal government including the SSA and the NCHS/CDC for the collection of vital statistics and reporting such to the agencies. Approximately \$200,000 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. Approximately \$1.1 million was received in FY 2011 for strengthening public health infrastructure from the federal government to be spent over 3 years.

I. Summary of Analysis Performed

The Hawaii population for the year 2011 is approximately 1.37 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 and develop new software that will register and issue vital records 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

As the Electronic Marriage Registration System and the Electronic Civil Union Registration System are implemented, the next program objective is to improve on those systems and to implement the 2003 national revisions to the electronic birth registration system.

**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			
	FY2011-12	FY2012-13	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19
OPERATING COST	8.00*	8.00*	8.00*	8.00*	8.0*	8.0*	8.0*	8.0*
PERSONAL SERVICES	379,389	482,266	610,352	610,352	611	611	611	611
OTHER CURRENT EXPENSES	146,391	195,120	86,493	86,493	86	86	86	86
<b>TOTAL OPERATING COST</b>	<b>525,780</b>	<b>677,386</b>	<b>696,845</b>	<b>696,845</b>	<b>697</b>	<b>697</b>	<b>697</b>	<b>697</b>
BY MEANS OF FINANCING								
GENERAL FUND	1.50*	1.50*	1.50*	1.50*	1.5*	1.5*	1.5*	1.5*
	158,463	214,722	218,048	218,048	218	218	218	218
FEDERAL FUNDS	6.50*	6.50*	6.50*	6.50*	6.5*	6.5*	6.5*	6.5*
	367,317	462,664	478,797	478,797	479	479	479	479
TOTAL POSITIONS	8.00*	8.00*	8.00*	8.00*	8.00*	8.00*	8.00*	8.00*
<b>TOTAL PROGRAM COST</b>	<b>525,780</b>	<b>677,386</b>	<b>696,845</b>	<b>696,845</b>	<b>697</b>	<b>697</b>	<b>697</b>	<b>697</b>

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

	FY 2011-12	FY 2012-13	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19
<b>MEASURES OF EFFECTIVENESS</b>								
1. % ACTIV COMPLTD W/IN ESTAB TMEFRM HI STATE DD PLAN	60	95	95	95	95	95	95	95
<b>PROGRAM TARGET GROUPS</b>								
1. INDIVIDUALS WITH DEVELOPMENTAL DISABILITIES	21493	21722	21722	21722	21722	21722	21722	21722
2. FAMILIES OF INDIVIDUALS WITH DEV. DISABILITIES	21493	21722	21722	21722	21722	21722	21722	21722
<b>PROGRAM ACTIVITIES</b>								
1. # INDIV/FAM MEMB PARTIC IN PUB AWARENESS/ED/TRNING	1247	1200	1200	1200	1200	1200	1200	1200
2. NUMBER OF SYSTEMS CHANGE ACTIVITIES	28	10	10	10	10	10	10	10
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	18	10	10	10	10	10	10	10
5. NO. ADMIN POLICIES IMPACTD BY COUNCIL'S ADVCY EFF	1	2	2	2	2	2	2	2
6. NUMBER OF COLLABORATION/COORDINATION ACTIVITIES	221	200	200	200	200	200	200	200
<b>PROGRAM REVENUES BY TYPE (IN THOUSANDS of DOLLARS)</b>								
REVENUE FROM OTHER AGENCIES: FEDERAL	478	478	478	478	478	478	478	478
TOTAL PROGRAM REVENUES	478	478	478	478	478	478	478	478
<b>PROGRAM REVENUES BY FUND (IN THOUSANDS of DOLLARS)</b>								
SPECIAL FUNDS	478	478	478	478	478	478	478	478
TOTAL PROGRAM REVENUES	478	478	478	478	478	478	478	478

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

A. Statement of Program Objective(s)

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)

There are no significant budget requests.

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 Allies in Self-Advocacy 2012 Honolulu Summit;
- 4) coordinating and co-sponsoring the annual Day at the Capitol event and the annual Legislative Forums and transition events on Kauai and Maui;
- 5) administering the Hawaii Donated Dental Services program contract;
- 6) conducting training in legislative advocacy;
- 7) supporting legislative measures that provide direct services and supports to individuals with DD and their families, and maximizes federal and state dollars;
- 8) participating on various committees to address aging, 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 engaging 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, respite care services and community supports.

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 (Hilopa'a Family to Family Information Health Center, Hawaii Waiver Providers Association, Hawaii Families as Allies, Community Children's Councils) on various activities such as the annual Day at the Capitol event, transition events, and legislative forums. 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

1. The current budget situation on the national and State level has potential to affect the Council's budget. The outcome of the pending "Fiscal Cliff" may result in across-the-board government spending cuts that could impact the Council's current and future level of federal funding.
2. The Administration on Intellectual and DD is revising how Councils report on their State Plan activities to better address GRPA (Government Performance and Results Act of 1993). Initiatives are underway to

revise the current annual program performance report template to more meaningful performance measures to better demonstrate Council outcomes and justify funding. Revised performance measures may change the way the Council conducts its systems change activities.

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. The Council recognizes the limited fiscal and staff resources to carry out the federal law requirements and has prioritized 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. As a "minimum allotment state" (based on population, economic indicators, etc.), the Council receives the minimum allotment for the program. For FY 2013, it is anticipated (pending any budget sequestration) that the allotment would be at the FY 2012 level of \$477,688.

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			
	FY2011-12	FY2012-13	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19
OPERATING COST	118.50*	118.50*	120.50*	120.50*	120.5*	120.5*	120.5*	120.5*
PERSONAL SERVICES	5,881,897	6,515,744	6,685,416	6,685,416	6,686	6,686	6,686	6,686
OTHER CURRENT EXPENSES	2,302,153	3,387,953	3,965,341	3,965,341	3,965	3,965	3,965	3,965
<b>TOTAL OPERATING COST</b>	<b>8,184,050</b>	<b>9,903,697</b>	<b>10,650,757</b>	<b>10,650,757</b>	<b>10,651</b>	<b>10,651</b>	<b>10,651</b>	<b>10,651</b>
BY MEANS OF FINANCING								
GENERAL FUND	7,251,500	7,822,348	9,148,927	9,148,927	9,149	9,149	9,149	9,149
FEDERAL FUNDS	932,550	2,081,349						
OTHER FEDERAL FUNDS			1,501,830	1,501,830	1,502	1,502	1,502	1,502
CAPITAL INVESTMENT APPROPRIATIONS								
DESIGN	1,788,000	759,000	303,000					
CONSTRUCTION	11,722,000	12,890,000	2,345,000					
<b>TOTAL CAPITAL APPROPRIATIONS</b>	<b>13,510,000</b>	<b>13,649,000</b>	<b>2,648,000</b>					
BY MEANS OF FINANCING								
G.O. BONDS	13,510,000	13,649,000	2,648,000					
TOTAL POSITIONS	118.50*	118.50*	120.50*	120.50*	120.50*	120.50*	120.50*	120.50*
<b>TOTAL PROGRAM COST</b>	<b>21,694,050</b>	<b>23,552,697</b>	<b>13,298,757</b>	<b>10,650,757</b>	<b>10,651</b>	<b>10,651</b>	<b>10,651</b>	<b>10,651</b>

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

	FY 2011-12	FY 2012-13	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19
<b>MEASURES OF EFFECTIVENESS</b>								
1. % ADMIN COSTS IN RELATION TO TOTAL DEPT COST	1	1	1	1	1	1	1	1
2. # ADMIN BILLS ENACTED	16	20	20	20	20	20	20	20
<b>PROGRAM TARGET GROUPS</b>								
1. STATEWIDE POPULATION (THOUSANDS)	1388	1401	1414	1427	1441	1454	1468	1482
2. # OF PROGRAMS & ATTACHED AGENCIES	25	25	25	25	25	25	25	25
3. # AUTHORIZED POSITIONS (PERM & TEMP)	3219	3230	3257	3260	3260	3260	3260	3260
<b>PROGRAM ACTIVITIES</b>								
1. # LEG PROPOSALS TRACKED FOR INFO OR TESTIMONY	2523	3000	3000	3000	3000	3000	3000	3000
2. # ADMIN BILLS INTRODUCED TO BOTH HOUSE & SENATE	23	30	25	25	25	25	25	25
<b>PROGRAM REVENUES BY TYPE (IN THOUSANDS of DOLLARS)</b>								
REVENUE FROM OTHER AGENCIES: FEDERAL	4,568	4,415	4,375	4,375	4,375	4,375	4,375	4,375
CHARGES FOR CURRENT SERVICES	1,112	1,112	1,112	1,112	1,112	1,112	1,112	1,112
TOTAL PROGRAM REVENUES	5,680	5,527	5,487	5,487	5,487	5,487	5,487	5,487
<b>PROGRAM REVENUES BY FUND (IN THOUSANDS of DOLLARS)</b>								
GENERAL FUNDS	4,581	4,581	4,581	4,581	4,581	4,581	4,581	4,581
SPECIAL FUNDS	1,099	946	906	906	906	906	906	906
TOTAL PROGRAM REVENUES	5,680	5,527	5,487	5,487	5,487	5,487	5,487	5,487

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

A. Statement of Program Objectives

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

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

1. Transfer in 1.00 temp Program Monitor (#91232H) and related funding for the Hawaii Multicultural Action Initiative grant from HTH 495/HB Adult Mental Health Administration to HTH 907/AP Office of Planning, Policy and Program Development (0.00/121,668A; 0.00/121,668A); (0.00/130,000P; 0.00/130,000P).
2. Transfer out 3.00 temp FTE and related funding for the State Office of Rural Health from HTH 907/AP Office of Planning, Policy and Program Development to HTH 560/KC Family Health Services Administration (0.00/731,740P; 0.00/731,740P).
3. Add 1.00 perm count only for Office Assistant III in the Human Resources Office (1.00/0A; 1.00/0A).
4. Convert from temp to perm 1.00 Privacy Officer in the Health Insurance Portability and Accountability Act of 1996 (HIPAA) section of the OPPPD (1.00/0A; 1.00/0A).
5. Add funding for the Hawaii Health Information Exchange Contract; includes funding of \$175,000A in each year of the FB 2013-15 for maintenance of the Hawaii Health Emergency Surveillance System (0.00/1,000,000A; 0.00/1,000,000A).
6. CIP request for Department of Health, Health and Safety, Statewide, Project No. 907141 (0.00/1,938,000C; 0.00/0C).
7. CIP request for Department of Health, Energy Efficiency Improvements, Statewide, Project No. 907142 (0.00/710,000C; 0.00/0C).

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

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.

**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 supports 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**

1. 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.
2. Severe fiscal constraints at both the Federal and State levels.
3. Policies and procedures established within other agencies.
4. A continuing effort to maintain compliance with the Health Insurance Portability and Accountability Act (HIPAA).

**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****J. Further Considerations**

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			
	FY2011-12	FY2012-13	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19
OPERATING COST	*	*	3.00*	3.00*	3.0*	3.0*	3.0*	3.0*
PERSONAL SERVICES			179,016	179,016	179	179	179	179
OTHER CURRENT EXPENSES			133,212	133,212	133	133	133	133
TOTAL OPERATING COST			312,228	312,228	312	312	312	312
BY MEANS OF FINANCING								
GENERAL FUND	*	*	3.00*	3.00*	3.0*	3.0*	3.0*	3.0*
			312,228	312,228	312	312	312	312
TOTAL POSITIONS	*	*	3.00*	3.00*	3.00*	3.00*	3.00*	3.00*
TOTAL PROGRAM COST			312,228	312,228	312	312	312	312

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

	FY 2011-12	FY 2012-13	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19
<b>MEASURES OF EFFECTIVENESS</b>								
1. % STATE AGENCIES IN COMPLIANCE W/ LANG ACCESS REQ	80	80	80	80	80	80	90	90
<b>PROGRAM TARGET GROUPS</b>								
1. NUMBER OF STATE AGENCIES	20	20	20	20	20	20	23	23
<b>PROGRAM ACTIVITIES</b>								
1. NUMBER OF TECHNICAL ASSISTANCE MEETINGS	30	30	30	30	30	30	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 SYSTEMS ERROR.

A. Statement of Program Objective

To provide centralized oversight, central coordination, and technical assistance to State agencies when implementing language access requirements between all levels of government and individuals who are precluded from using public services due to language proficiency barriers.

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

Transfer in the Office of Language Access, as an administratively attached agency, from the Department of Labor to the Department of Health pursuant to Act 201, SLH 2012 (HB2374 SD1), effective 7/1/12 (3.00/312,228A; 3.00/312,228A).

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

Program functions with three less positions to perform its function; authorization was initially 6.00 FTE and is currently 3.00 FTE.

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 PerformedJ. Further Considerations

No further considerations at this time.



OPERATING AND CAPITAL APPROPRIATIONS

REPORT P61-A

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

PROGRAM EXPENDITURES	IN DOLLARS				IN THOUSANDS			
	FY2011-12	FY2012-13	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19
OPERATING COST	21.00*	21.00*	21.00*	21.00*	21.0*	21.0*	21.0*	21.0*
PERSONAL SERVICES	2,218,420	2,206,999	2,320,408	2,320,408	2,320	2,320	2,320	2,320
OTHER CURRENT EXPENSES	12,969,179	12,692,875	18,397,875	18,617,875	18,618	18,618	18,618	18,618
<b>TOTAL OPERATING COST</b>	<b>15,187,599</b>	<b>14,899,874</b>	<b>20,718,283</b>	<b>20,938,283</b>	<b>20,938</b>	<b>20,938</b>	<b>20,938</b>	<b>20,938</b>
BY MEANS OF FINANCING								
GENERAL FUND	10.74*	10.74*	10.74*	10.74*	10.7*	10.7*	10.7*	10.7*
SPECIAL FUND	7,179,027	7,132,435	12,852,027	13,072,027	13,072	13,072	13,072	13,072
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	7,802,796	7,569,144	7,010,240	7,010,240	7,010	7,010	7,010	7,010
	*	*	*	*	*	*	*	*
CAPITAL INVESTMENT APPROPRIATIONS								
CONSTRUCTION	500,000	750,000						
<b>TOTAL CAPITAL APPROPRIATIONS</b>	<b>500,000</b>	<b>750,000</b>						
BY MEANS OF FINANCING								
G.O. BONDS	500,000	750,000						
<b>TOTAL POSITIONS</b>	<b>21.00*</b>	<b>21.00*</b>	<b>21.00*</b>	<b>21.00*</b>	<b>21.00*</b>	<b>21.00*</b>	<b>21.00*</b>	<b>21.00*</b>
<b>TOTAL PROGRAM COST</b>	<b>15,687,599</b>	<b>15,649,874</b>	<b>20,718,283</b>	<b>20,938,283</b>	<b>20,938</b>	<b>20,938</b>	<b>20,938</b>	<b>20,938</b>

**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			
	FY2011-12	FY2012-13	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19
OPERATING COST	14.00*	14.00*	14.00*	14.00*	14.0*	14.0*	14.0*	14.0*
PERSONAL SERVICES	1,282,586	1,309,850	1,352,012	1,352,012	1,352	1,352	1,352	1,352
OTHER CURRENT EXPENSES	12,468,612	12,192,308	17,872,308	18,092,308	18,092	18,092	18,092	18,092
TOTAL OPERATING COST	13,751,198	13,502,158	19,224,320	19,444,320	19,444	19,444	19,444	19,444
BY MEANS OF FINANCING								
GENERAL FUND	5.74*	5.74*	5.74*	5.74*	5.7*	5.7*	5.7*	5.7*
5,948,402	5,933,014	11,621,402	11,841,402	11,841	11,841	11,841	11,841	
FEDERAL FUNDS	8.26*	8.26*	8.26*	8.26*	8.3*	8.3*	8.3*	8.3*
7,802,796	7,569,144	7,010,240	7,010,240	7,010	7,010	7,010	7,010	
OTHER FEDERAL FUNDS	*	*	*	*	*	*	*	*
592,678		592,678	592,678	593	593	593	593	
CAPITAL INVESTMENT APPROPRIATIONS								
CONSTRUCTION	500,000	750,000						
TOTAL CAPITAL APPROPRIATIONS	500,000	750,000						
BY MEANS OF FINANCING								
G.O. BONDS	500,000	750,000						
TOTAL POSITIONS	14.00*	14.00*	14.00*	14.00*	14.00*	14.00*	14.00*	14.00*
TOTAL PROGRAM COST	14,251,198	14,252,158	19,224,320	19,444,320	19,444	19,444	19,444	19,444

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

	FY 2011-12	FY 2012-13	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19
<b>MEASURES OF EFFECTIVENESS</b>								
1. OF ALL PERSONS 60 YEARS AND OLDER, PERCENT SERVED	39	40	40	40	40	40	40	40
2. OF ALL REG CLIENTS, % SERVED A MEAL	78	85	85	85	85	85	85	85
3. OF ALL REG CLIENTS % LIVING ALONE	38	35	35	35	35	35	35	35
4. OF ALL REG CLIENTS % BELOW POVERTY LEVEL	25	27	27	27	27	27	27	27
5. OF ALL REG CLIENTS % WHO ARE CAREGIVERS	19	18	18	18	18	18	18	18
6. OF ALL REG CLIENTS, % DIFFIC DOING 1 OR MORE ADL	48	45	45	45	45	45	45	45
7. % OF ADCRC CLIENTS WHO RECEIVED A REFERRAL	55	51	51	51	51	51	51	51
8. % OMBUDSMAN PROGRAM CASES RESPOND TO W/IN 72 HRS	100	100	100	100	100	100	100	100
<b>PROGRAM TARGET GROUPS</b>								
1. NUMBER OF PERSONS AGE 60 YEARS AND OLDER	277360	278201	285841	293481	293481	293481	293481	293481
2. # OF PERSONS AGE >= 60 BELOW POVERTY LEVEL	20805	20989	21576	22162	22162	22162	22162	22162
3. # OF PERSONS WHO ACCESSED THE ADCRC	34358	32000	32000	32000	32000	32000	32000	32000
4. # PERSONS AGE 60 & OLDER W/1 OR MORE DISABILITIES	99850	106884	109819	112754	112754	112754	112754	112754
5. # RESDTS IN LIC LTC NRSG HOMES/ARCH/ASST LVG FACIL	10906	10217	10217	10217	10217	10217	10217	10217
<b>PROGRAM ACTIVITIES</b>								
1. NUMBER OF CONG/HOME DEL MEALS SERVED TO CLIENTS	692457	726000	726000	726000	726000	726000	726000	726000
2. NUMBER OF CASE MGT SERVICES REC'D BY CLIENTS	26354	26000	26000	26000	26000	26000	26000	26000
3. # PERS CARE, HMKR, AND CHORE SVCS REC'D BY CLIENTS	75899	72000	72000	72000	72000	72000	72000	72000
4. # OF REFERRALS TO ADCRC CLIENTS FOR PUB/PVT SVCS	14532	17000	18000	19000	19000	19000	19000	19000
5. # OF FAMILY CG SUPPORT SVCS REC'D BY REG CLIENTS	23548	25500	25500	25500	25500	25500	25500	25500
6. # OF ACTIVE CASES IN THE OMBUDSMAN PROGRAM	110	115	115	115	115	115	115	115
7. # OF CONTACTS MADE TO ADCRC	34358	34000	36000	38000	38000	38000	38000	38000
<b>PROGRAM REVENUES BY TYPE (IN THOUSANDS of DOLLARS)</b>								
REVENUE FROM OTHER AGENCIES: FEDERAL	8,032	6,320	5,637	5,637	5,568	5,568	5,568	5,568
REVENUE FROM OTHER AGENCIES: ALL OTHER	550	550	550	550	550	550	550	550
TOTAL PROGRAM REVENUES	8,582	6,870	6,187	6,187	6,118	6,118	6,118	6,118
<b>PROGRAM REVENUES BY FUND (IN THOUSANDS of DOLLARS)</b>								
SPECIAL FUNDS	8,482	6,870	6,187	6,187	6,118	6,118	6,118	6,118
ALL OTHER FUNDS	100							
TOTAL PROGRAM REVENUES	8,582	6,870	6,187	6,187	6,118	6,118	6,118	6,118

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

**A. Statement of Program Objective**

To enable older 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. Add request of \$4,200,000 in FY 14 and FY 15 for Kupuna Care to support the most vulnerable older adults with supports sufficient to reduce their risk of admission to a facility. (0.00/4,200,000A; 0.00/4,200,000A).
2. Add request of \$1,400,000 in FY 14 and FY 15 for the Aging and Disability Resource Centers (ADRC) to assist in project coordination, MIS/IT, marketing, and site implementation. (0.00/1,400,000A; 0.00/1,400,000A)
3. Add request of \$380,000 in FY 14 and FY 15 to conduct a feasibility study for a mandatory, social LTC insurance for EOA Long-term Care and to conduct the actuarial study (0.00/80,000A; 0.00/300,000A)

**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; promoting and establishing basic services for family caregivers.

The Aging and Disability Resource Center (ADRC) is:

1. implementing a 5-year ADRC operational plan and budget for achieving statewide coverage;
2. expanding and formalizing linkages with key aging, disability and health care providers;
3. providing options counseling training to staff;
4. making enhancements to the Hawaii ADRC website to improve access to information and services; and
5. maintaining an integrated data collection and reporting system for quality assurance and evaluation.

Stakeholder workgroups meet to establish lines of communication between EOA, hospitals, and other partners and research evidence-based models that can help hospital patients return home successfully and avoid unnecessary readmission. The Hospital Discharge Planning Model (HDPM) initiative serves to 1) put the patient and caregiver(s) at the center of the discharge planning process, 2) focus on discharging patients to home and community-based services, 3) reduce the number of patients retained in acute care beds past the point of clinical discharge, and 4) reduce the number of default discharges from acute care units to nursing facilities

**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 a fully functioning ADRC statewide, it will work to provide services for the disabled.

Health Care Reform and Provisions of the Patient Protection and Affordable Care Act. The U.S. Administration on Aging is implementing the Affordable Care Act through initiatives on evidence-based care transitions to reduce avoidable hospital readmissions, options counseling to help citizens navigate health and long-term supports, and assistance to guide individuals to maximize their Medicare or private health insurance benefits.

Greater shifting of federal program responsibilities to the states. Federal deficit reduction efforts are expected to modify old age benefit programs, (i.e.-Medicare/Social Security) and shift the responsibility to states to develop public education campaigns to explain changes. This trend is significant and expected to affect the Medicaid population as well as Medicare recipients. Medicare modernization is expected to produce cost efficiencies for the Federal government yet expand state responsibilities for Medicare information, education, counseling and decision assistance to Medicaid and Medicare beneficiaries due to the anticipated changes in benefits, selection and choice.

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 Revenue

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--			
	FY2011-12	FY2012-13	FY2013-14	FY2014-15	FY2015-16	FY2016-17	FY2017-18	FY2018-19
OPERATING COST	7.00*	7.00*	7.00*	7.00*	7.0*	7.0*	7.0*	7.0*
PERSONAL SERVICES	935,834	897,149	968,396	968,396	968	968	968	968
OTHER CURRENT EXPENSES	500,567	500,567	525,567	525,567	526	526	526	526
<b>TOTAL OPERATING COST</b>	<b>1,436,401</b>	<b>1,397,716</b>	<b>1,493,963</b>	<b>1,493,963</b>	<b>1,494</b>	<b>1,494</b>	<b>1,494</b>	<b>1,494</b>
BY MEANS OF FINANCING	5.00*	5.00*	5.00*	5.00*	5.0*	5.0*	5.0*	5.0*
GENERAL FUND	1,230,625	1,199,421	1,230,625	1,230,625	1,231	1,231	1,231	1,231
SPECIAL FUND	10,000	10,000	10,000	10,000	10	10	10	10
INTERDEPT. TRANSFER	2.00*	2.00*	2.00*	2.00*	2.0*	2.0*	2.0*	2.0*
	195,776	188,295	253,338	253,338	253	253	253	253
TOTAL POSITIONS	7.00*	7.00*	7.00*	7.00*	7.00*	7.00*	7.00*	7.00*
<b>TOTAL PROGRAM COST</b>	<b>1,436,401</b>	<b>1,397,716</b>	<b>1,493,963</b>	<b>1,493,963</b>	<b>1,494</b>	<b>1,494</b>	<b>1,494</b>	<b>1,494</b>

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

	FY 2011-12	FY 2012-13	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19
<b>MEASURES OF EFFECTIVENESS</b>								
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 LNTERPRETERS TESTD WHO ARE CREDENTIALD	80	80	80	80	80	80	80	80
5. % OF DOCUMENT REVIEWS WITHOUT DISCREPANCIES	60	60	60	60	60	60	60	60
<b>PROGRAM TARGET GROUPS</b>								
1. PERSONS WITH DISABILITIES	244463	244463	244463	244463	244463	244463	244463	244463
<b>PROGRAM ACTIVITIES</b>								
1. NO. NEWSLETTERS, FACT SHEETS & BROCHURES DEVELOPED	20	20	20	20	20	20	20	20
2. NUMBER OF SIGN LANGUAGE INTERPRETERS TESTED	4	10	10	10	10	10	10	10
3. NO. OF INFO/REFERRAL & TECH ASST REQUESTS RECEIVED	3125	3000	3000	3000	3000	3000	3000	3000
4. NUMBER OF DISABLED PERSONS PARKING PERMITS ISSUED	27231	28000	30000	30000	30000	30000	30000	30000
5. NO. PUBLIC INFO & EDUCATION TRNG SESSNS CONDUCTED	50	50	50	50	50	50	50	50
6. NUMBER OF BLUEPRINT DOCUMENTS REVIEWED	888	900	900	900	900	900	900	900
7. # INTERPRET OPINIONS/SITE SPECFC ALT DESIGNS ISSUD	1	10	10	10	10	10	10	10
8. NO. FED/STATE/COUNTY PUBLIC POLICY RECOMMENDATIONS	40	40	40	40	40	40	40	40
9. # COMMUN ADVISORY COMMITTEES AS ACTIVE PARTICPANTS	15	15	15	15	15	15	15	15
<b>PROGRAM REVENUES BY TYPE (IN THOUSANDS of DOLLARS)</b>								
CHARGES FOR CURRENT SERVICES	2	2	2	2	2	2	2	2
TOTAL PROGRAM REVENUES	2	2	2	2	2	2	2	2
<b>PROGRAM REVENUES BY FUND (IN THOUSANDS of DOLLARS)</b>								
SPECIAL FUNDS	2	2	2	2	2	2	2	2
TOTAL PROGRAM REVENUES	2	2	2	2	2	2	2	2

NOTE: PROGRAM REVENUES BY TYPE AND FUND MAY NOT BE ACCURATE DUE TO SYSTEMS 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 additional funds are being requested. However, the program is requesting to 1) increase the ceiling for the Special Parent Information Network due to anticipated increase in expenditures (0.00/57,562U; 0.00/57,562U), and 2) reallocate a Program Specialist position to a Program Support Technician position and increase a temp Facility Access Support Spec by FTE 0.50 (0.00/0A; 0.00/0A).

C. Description of Activities Performed

1. Administer the Statewide program for parking for disabled persons, in accordance with Part III of Chapter 291, HRS.
2. Establish 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 Disability and Communication Access Board (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 will begin collecting a fee for blueprint review services under Section 103-50, HRS. This revenue source will permit general funds to be reduced in the second year of the Biennium Budget. This adjustment will be made in a Supplemental Budget Request.

I. Summary of Analysis Performed

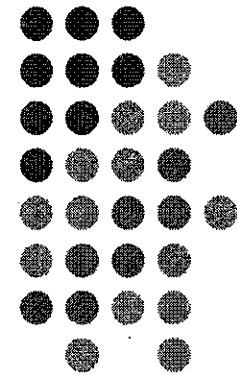
None.

J. Further Considerations

None.

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## Capital Budget Details



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

PROGRAM ID **HTH-840**PROGRAM STRUCTURE NO. **040101**PROGRAM TITLE **ENVIRONMENTAL MANAGEMENT**

PROJECT NUMBER	PRIORITY NUMBER	LOC	SCOPE	PROJECT TITLE	BUDGET PERIOD						SUCCEED YEARS			
					COST ELEMENT/MOF	PROJECT TOTAL	PRIOR YRS	FY 11-12	FY 12-13	FY 13-14		FY 14-15	FY 15-16	FY 16-17
840141	1		NEW	WASTENATER TREATMENT REVOLVING FUND FOR POLLUTION CONTROL, STATEWIDE										
			CONSTRUCTION		395,697	331,529	18,938	18,938	13,146	13,146				
			TOTAL		395,697	331,529	18,938	18,938	13,146	13,146				
			FEDERAL FUNDS		285,505	232,051	15,781	15,781	10,946	10,946				
			G.O. BONDS		110,192	99,478	3,157	3,157	2,200	2,200				
840142	2		NEW	SAFE DRINKING WATER REVOLVING FUND, STATEWIDE										
			CONSTRUCTION		200,947	146,471	16,288	16,288	10,950	10,950				
			TOTAL		200,947	146,471	16,288	16,288	10,950	10,950				
			FEDERAL FUNDS		166,948	121,552	13,573	13,573	9,125	9,125				
			G.O. BONDS		33,999	24,919	2,715	2,715	1,825	1,825				
PROGRAM TOTALS														
			CONSTRUCTION		1,465,428	1,346,784	35,226	35,226	24,096	24,096				
			TOTAL		1,465,428	1,346,784	35,226	35,226	24,096	24,096				
			G.O. BONDS		378,446	358,652	5,872	5,872	4,025	4,025				
			FEDERAL FUNDS		1,086,982	988,132	29,354	29,354	20,071	20,071				

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 SERVICES**

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PROJECT NUMBER	PRIORITY NUMBER	LOC	SCOPE	PROJECT TITLE		BUDGET PERIOD						SUCCEED YEARS		
				PROJECT TOTAL	PRIOR YRS	FY 11-12	FY 12-13	FY 13-14	FY 14-15	FY 15-16	FY 16-17		FY 17-18	FY 18-19
100131	1		RENOVATION	KALAUPAPA SETTLEMENT IMPROVEMENTS, MOLOKAI										
			DESIGN	1			1							
			CONSTRUCTION	929			929							
			TOTAL	930			930							
			G.O. BONDS	930			930							
PROGRAM TOTALS														
			DESIGN	1,552	1,551		1							
			CONSTRUCTION	2,387	1,458		929							
			EQUIPMENT	1	1									
			TOTAL	3,940	3,010		930							
			G.O. BONDS	3,940	3,010		930							

STATE OF HAWAII

REQUIRED CAPITAL APPROPRIATIONS - BY CAPITAL PROJECT  
IN THOUSANDS OF DOLLARS

REPORT 878

PROGRAM ID HTH-730

PROGRAM STRUCTURE NO. 050103

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PROGRAM TITLE EMERGENCY MEDICAL SVCS & INJURY PREV SYS

PROJECT NUMBER	PRIORITY NUMBER	LOC	SCOPE	PROJECT TITLE	BUDGET PERIOD								SUCCEED YEARS
					PROJECT TOTAL	PRIOR YRS	FY 11-12	FY 12-13	FY 13-14	FY 14-15	FY 15-16	FY 16-17	
PROGRAM TOTALS													
				PLANS	70	70							
				DESIGN	560	560							
				CONSTRUCTION	3,025	3,025							
				EQUIPMENT	195	195							
				TOTAL	3,850	3,850							
				G.O. BONDS	3,850	3,850							

STATE OF HAWAII

REQUIRED CAPITAL APPROPRIATIONS - BY CAPITAL PROJECT  
IN THOUSANDS OF DOLLARS

REPORT 878

PROGRAM ID HTH-560

PROGRAM STRUCTURE NO. 050104

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PROGRAM TITLE FAMILY HEALTH SERVICES

PROJECT NUMBER	PRIORITY NUMBER	LOC	SCOPE	PROJECT TITLE	BUDGET PERIOD								SUCCEED YEARS	
					PROJECT TOTAL	PRIOR YRS	FY 11-12	FY 12-13	FY 13-14	FY 14-15	FY 15-16	FY 16-17		FY 17-18
PROGRAM TOTALS														
				CONSTRUCTION	400	400								
				TOTAL	400	400								
				G.O. BONDS	400	400								



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

PROGRAM ID **HTH-595**PROGRAM STRUCTURE NO. **050106**PROGRAM TITLE **HEALTH RESOURCES ADMINISTRATION**

PROJECT NUMBER	PRIORITY NUMBER	LOC	SCOPE	PROJECT TITLE		BUDGET PERIOD						SUCCEED YEARS			
						PROJECT TOTAL	PRIOR YRS	FY 11-12	FY 12-13	FY 13-14	FY 14-15		FY 15-16	FY 16-17	FY 17-18
P11031			NEW		HALE HOOLUOLU HOSPICE FACILITY, MAUI										
			PLANS	1			1								
			LAND	1			1								
			DESIGN	1			1								
			CONSTRUCTION	496			496								
			EQUIPMENT	1			1								
			TOTAL	500			500								
			G.O. BONDS	500			500								
P11032			NEW		MOLOKAI OHANA HEALTH CENTER, MOLOKAI										
			DESIGN	1			1								
			CONSTRUCTION	999			499	500							
			TOTAL	1,000			500	500							
			G.O. BONDS	1,000			500	500							
P11033			NEW		REHABILITATION HOSPITAL OF THE PACIFIC FOUNDATION, OAHU										
			PLANS	1			1								
			DESIGN	1			1								
			CONSTRUCTION	2,498			2,498								
			TOTAL	2,500			2,500								
			G.O. BONDS	2,500			2,500								
P11034			NEW		MAHIAMA GENERAL HOSPITAL, OAHU										
			PLANS	1			1								
			DESIGN	1			1								
			CONSTRUCTION	3,498			2,498	1,000							
			TOTAL	3,500			2,500	1,000							
			G.O. BONDS	3,500			2,500	1,000							

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

PROGRAM ID **HTH-595**  
PROGRAM STRUCTURE NO. **050106**  
PROGRAM TITLE **HEALTH RESOURCES ADMINISTRATION**

PROJECT NUMBER	PRIORITY NUMBER	LOC	SCOPE	PROJECT TITLE		BUDGET PERIOD						SUCCEED YEARS		
				PROJECT TOTAL	PRIOR YRS	FY 11-12	FY 12-13	FY 13-14	FY 14-15	FY 15-16	FY 16-17		FY 17-18	FY 18-19
P12027			NEW	WAHIAWA GENERAL HOSPITAL, OAHU										
			PLANS	1			1							
			DESIGN	1			1							
			CONSTRUCTION	248			248							
			TOTAL	250			250							
			G.O. BONDS	250			250							
P12028			NEW	MAI'ANAE COAST COMPREHENSIVE HEALTH CENTER (MCCHC), OAHU										
			CONSTRUCTION	2,000			2,000							
			TOTAL	2,000			2,000							
			G.O. BONDS	2,000			2,000							
P12029			NEW	HAWAII ISLAND COMMUNITY DEVELOPMENT CORPORATION, HAWAII										
			PLANS	1			1							
			LAND	383			383							
			DESIGN	1			1							
			TOTAL	385			385							
			G.O. BONDS	385			385							
P12030			NEW	LANAI COMMUNITY HEALTH CENTER, LANAI										
			PLANS	1			1							
			DESIGN	1			1							
			CONSTRUCTION	498			498							
			TOTAL	500			500							
			G.O. BONDS	500			500							

STATE OF HAWAII

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

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PROGRAM ID **HTH-595**PROGRAM STRUCTURE NO. **050106**

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PROGRAM TITLE **HEALTH RESOURCES ADMINISTRATION**

PROJECT NUMBER	PRIORITY NUMBER	LOC	SCOPE COST ELEMENT/MOF	PROJECT TITLE		BUDGET PERIOD						SUCCEED YEARS
				PROJECT TOTAL	PRIOR YRS	FY 11-12	FY 12-13	FY 13-14	FY 14-15	FY 15-16	FY 16-17	
<b>PROGRAM TOTALS</b>												
			PLANS	1,138	1,132	3	3					
			LAND	3,584	3,200	1	383					
			DESIGN	2,500	2,493	4	3					
			CONSTRUCTION	39,993	29,756	5,991	4,246					
			EQUIPMENT	369	368	1						
			<b>TOTAL</b>	<b>47,584</b>	<b>36,949</b>	<b>6,000</b>	<b>4,635</b>					
			G.D. BONDS	47,584	36,949	6,000	4,635					

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

PROGRAM ID **HTH-210**PROGRAM STRUCTURE NO. **050201**PROGRAM TITLE **HAWAII HEALTH SYSTEMS CORP - CORP OFFICE**

PROJECT NUMBER	PRIORITY NUMBER	LOC	SCOPE	PROJECT TITLE		BUDGET PERIOD						SUCCEED YEARS		
				PROJECT TOTAL	PRIOR YRS	FY 11-12	FY 12-13	FY 13-14	FY 14-15	FY 15-16	FY 16-17		FY 17-18	FY 18-19
P11035			NEW	LANAI COMMUNITY HOSPITAL, RENOVATION, REPAIR, EXPANSION AND MASTER PLANNING PROJECT, LANAI										
			PLANS DESIGN	1		1								
			TOTAL	1,339		1,339								
			G.O. BONDS	1,340		1,340								
210001			NEW	HAWAII HEALTH SYS CORP, HOSPITAL INFORMATION / ELECTRONIC MEDICAL RECORD SYSTEM, STATEWIDE										
			EQUIPMENT	27,680		5,900	7,100	14,321	359					
			TOTAL	27,680		5,900	7,100	14,321	359					
			G.O. BONDS	27,680		5,900	7,100	14,321	359					
PROGRAM TOTALS														
			PLANS DESIGN	612	611	1								
			CONSTRUCTION	19,070	17,731	1,339								
			EQUIPMENT	44,745	44,745									
			TOTAL	28,410	730	5,900	7,100	14,321	359					
			G.O. BONDS	92,837	63,817	7,240	7,100	14,321	359					

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

PROGRAM ID **HTH-211**PROGRAM STRUCTURE NO. **050202**PROGRAM TITLE **KAHUKU HOSPITAL**

PROJECT NUMBER	PRIORITY NUMBER	LOC	SCOPE	PROJECT TITLE		BUDGET PERIOD						SUCCEED YEARS							
				PROJECT TOTAL	PRIOR YRS	FY 11-12	FY 12-13	FY 13-14	FY 14-15	FY 15-16	FY 16-17		FY 17-18	FY 18-19					
211401			RENOVATION	KAHUKU MEDICAL CENTER, PATIENT ROOM															
			DESIGN		46							46							
			CONSTRUCTION		294							294							
			TOTAL		340							340							
			G.O. BONDS		340							340							
211404			RENOVATION	KAHUKU MEDICAL CENTER, UPGRADE GENERATOR AND ELECTRICAL SYSTEM, OAHU															
			DESIGN		115							115							
			CONSTRUCTION		466							466							
			EQUIPMENT		400							400							
			TOTAL		981							981							
			G.O. BONDS		981							981							
211405			RENOVATION	KAHUKU MEDICAL CENTER, REPLACE FIRE ALARM SYSTEM, OAHU															
			DESIGN		61							61							
			CONSTRUCTION		220							220							
			EQUIPMENT		200							200							
			TOTAL		481							481							
			G.O. BONDS		481							481							
211406			RENOVATION	KAHUKU MEDICAL CENTER, REPLACE NURSE CALL SYSTEM, OAHU															
			DESIGN		46							46							
			CONSTRUCTION		173							173							
			EQUIPMENT		100							100							
			TOTAL		319							319							
			G.O. BONDS		319							319							

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

PROGRAM ID **HTH-211**PROGRAM STRUCTURE NO. **050202**PROGRAM TITLE **KAHUKU HOSPITAL**

PROJECT NUMBER	PRIORITY NUMBER	LOC	SCOPE	PROJECT TITLE	BUDGET PERIOD								SUCCEED YEARS	
					PROJECT TOTAL	PRIOR YRS	FY 11-12	FY 12-13	FY 13-14	FY 14-15	FY 15-16	FY 16-17		FY 17-18
211407			RENOVATION	KAHUKU MEDICAL CENTER, REPLACE EXIT DOORS AND FRAMES, OAHU										
			DESIGN		20							20		
			CONSTRUCTION		84							84		
			TOTAL		104							104		
			G.O. BONDS		104							104		
PROGRAM TOTALS														
			DESIGN		288				176			112		
			CONSTRUCTION		1,237				686			551		
			EQUIPMENT		700				600			100		
			TOTAL		2,225				1,462			763		
			G.O. BONDS		2,225				1,462			763		

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

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 11-12	FY 12-13	FY 13-14	FY 14-15	FY 15-16	FY 16-17		FY 17-18	FY 18-19
P11036			REPLACEMENT	KONA COMMUNITY HOSPITAL UPGRADE, HAWAII										
			PLANS	1		1								
			DESIGN	1		1								
			CONSTRUCTION	4,997		4,997								
			EQUIPMENT	1		1								
			TOTAL	5,000		5,000								
			G.O. BONDS	5,000		5,000								
P11037			NEW	KAHUKU MEDICAL CENTER, OAHU										
			PLANS	1		1								
			DESIGN	1		1								
			CONSTRUCTION	4,998		4,998								
			TOTAL	5,000		5,000								
			G.O. BONDS	5,000		5,000								
P12031			NEW	HHSC, REPAIR AND MAINTENANCE PROJECTS TO ALSO INCLUDE HEALTH AND SAFETY PROJECTS, STATEWID										
			PLANS	100		100								
			DESIGN	100		100								
			CONSTRUCTION	19,600		19,600								
			EQUIPMENT	200		200								
			TOTAL	20,000		20,000								
			G.O. BONDS	20,000		20,000								
223105	M-16		RENOVATION	KULA HOSPITAL, EXTERIOR BUILDING RENOVATIONS, MAUI										
			DESIGN	200		200								
			CONSTRUCTION	2,300		1,800	500							
			EQUIPMENT	1,000		500	500							
			TOTAL	3,500		2,500	1,000							
			G.O. BONDS	3,500		2,500	1,000							

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

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 11-12	FY 12-13	FY 13-14	FY 14-15	FY 15-16	FY 16-17		FY 17-18
223107			RENOVATION	KULA HOSPITAL, EXTERIOR BUILDING AND WARD		ROOM RENOVATION, MAUI							
			DESIGN	200								200	
			CONSTRUCTION	481								481	
			EQUIPMENT	800								800	
			TOTAL	1,481								1,481	
			G.O. BONDS	1,481								1,481	
224001			RENOVATION	LANAI COMMUNITY HOSPITAL, ELEVATOR UPGRADE,		LANAI							
			DESIGN	200								200	
			CONSTRUCTION	700								700	
			EQUIPMENT	600								600	
			TOTAL	1,500								1,500	
			G.O. BONDS	1,500								1,500	
224104			RENOVATION	LANAI COMMUNITY HOSPITAL, REPAIRS TO		FACILITY, LANAI							
			DESIGN	200								200	
			CONSTRUCTION	1,500								1,500	
			EQUIPMENT	300								300	
			TOTAL	2,000								2,000	
			G.O. BONDS	2,000								2,000	
224400			RENOVATION	LANAI COMMUNITY HOSPITAL, GENERATOR		REPLACEMENT, LANAI							
			DESIGN	10								10	
			CONSTRUCTION	39								39	
			EQUIPMENT	1								1	
			TOTAL	50								50	
			G.O. BONDS	50								50	



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

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 11-12	FY 12-13	FY 13-14	FY 14-15	FY 15-16	FY 16-17		FY 17-18	FY 18-19
231401			REPLACEMENT	KAUAI VETERANS MEMORIAL HOSPITAL, REPLACE AIR CONDITIONING CHILLERS AND EQUIPMENT, KAUAI										
			DESIGN	92		92								
			CONSTRUCTION	608		608								
			EQUIPMENT	1,500		1,500								
			TOTAL	2,200		2,200								
			G.O. BONDS	2,200		2,200								
231402			REPLACEMENT	KAUAI VETERANS MEMORIAL HOSPITAL, REPLACE NURSE CALL AND BABY ABDUCTION SYSTEM, KAUAI										
			DESIGN	50		50								
			EQUIPMENT	450		450								
			TOTAL	500		500								
			G.O. BONDS	500		500								
231403			NEW	KAUAI VETERANS MEMORIAL HOSPITAL, MASTER PLANNING, KAUAI										
			PLANS	500		500								
			TOTAL	500		500								
			G.O. BONDS	500		500								
232401			RENOVATION	SAMUEL MAHELONA MEMORIAL HOSPITAL, REPLACE EXTERIOR DOORS, KAUAI										
			DESIGN	75		75								
			CONSTRUCTION	525		300		225						
			EQUIPMENT	500		450		50						
			TOTAL	1,100		825		275						
			G.O. BONDS	1,100		825		275						

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

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 11-12	FY 12-13	FY 13-14	FY 14-15	
232402			REPLACEMENT	SAMUEL MAHELONA MEMORIAL HOSPITAL, REPLACE		NURSE CALL & PATIENT WANDERING SYSTEM, KAUAI						
			DESIGN	50		50						
			EQUIPMENT	450		450						
			TOTAL	500		500						
			G.O. BONDS	500		500						
232404			NEW	SAMUEL MAHELONA MEMORIAL HOSPITAL, MASTER		PLANNING, KAUAI						
			PLANS	500		500						
			TOTAL	500		500						
			G.O. BONDS	500		500						
232504			REPLACEMENT	SAMUEL MAHELONA MEMORIAL HOSPITAL, REPLACE		OUTDOOR PATIENT DINING ROOM, KAUAI						
			DESIGN	50		50						
			CONSTRUCTION	450		450						
			TOTAL	500		500						
			G.O. BONDS	500		500						
241401	0-24		NEW	MALUHIA, MASTER PLAN, OAHU								
			PLANS	500		500						
			TOTAL	500		500						
			G.O. BONDS	500		500						

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

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 11-12	FY 12-13	FY 13-14	FY 14-15		FY 15-16	FY 16-17	FY 17-18
241403			REPLACEMENT	MALUHIA, REPLACE CHILL WATER LINE INSULATION, OAHU											
			DESIGN	61						61					
			CONSTRUCTION	439						439					
			TOTAL	500						500					
			G.O. BONDS	500						500					
241404			REPLACEMENT	MALUHIA, MODERNIZATION OF ELEVATORS, OAHU											
			CONSTRUCTION	542						542					
			TOTAL	542						542					
			G.O. BONDS	542						542					
241405			NEW	MALUHIA, INSTALL PHOTOVOLTAIC PANELS, OAHU											
			DESIGN	75						75					
			CONSTRUCTION	343						343					
			EQUIPMENT	402						402					
			TOTAL	820						820					
			G.O. BONDS	820						820					
241406			OTHER	MALUHIA, UPGRADE AIR CONDITIONING SYSTEM, OAHU											
			DESIGN	138						138					
			CONSTRUCTION	500						500					
			EQUIPMENT	581						581					
			TOTAL	1,219						1,219					
			G.O. BONDS	1,219						1,219					

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

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 11-12	FY 12-13	FY 13-14	FY 14-15		FY 15-16	FY 16-17	FY 17-18
241407			REPLACEMENT	MALUHIA, REPLACE DIETARY COMPRESSORS FOR FREEZERS AND REFRIGERATORS, OAHU										
			DESIGN		12					12				
			EQUIPMENT		56					56				
			TOTAL		68					68				
			G.O. BONDS		68					68				
241411			RENOVATION	MALUHIA, UPGRADE PLUMBING IN HOSPITAL, OAHU										
			DESIGN		40					40				
			CONSTRUCTION		219					219				
			TOTAL		259					259				
			G.O. BONDS		259					259				
242401			NEW	LEAHI HOSPITAL, MASTER PLAN, OAHU										
			PLANS		2,000			1,500		500				
			TOTAL		2,000			1,500		500				
			G.O. BONDS		2,000			1,500		500				
242402			RENOVATION	LEAHI HOSPITAL, REROOF YOUNG BUILDING, OAHU										
			DESIGN		80					80				
			CONSTRUCTION		520					520				
			TOTAL		600					600				
			G.O. BONDS		600					600				

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

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 11-12	FY 12-13	FY 13-14	FY 14-15		FY 15-16	FY 16-17
242403			RENOVATION	LEAHI HOSPITAL, REPLACE WALK-IN FREEZER & REFRIGERATOR & COOL FOOD ASSEMBLY AREA, OAHU										
			DESIGN	61		61								
			CONSTRUCTION	289		289								
			EQUIPMENT	150		150								
			TOTAL	500		500								
			G.O. BONDS	500		500								
242404			RENOVATION	LEAHI HOSPITAL, RENOVATE VACATED UH SPACES IN ATHERTON AND ADMINISTRATION BUILDINGS, OAHU										
			DESIGN	98		98								
			CONSTRUCTION	650		650								
			TOTAL	748		748								
			G.O. BONDS	748		748								
242405			RENOVATION	LEAHI HOSPITAL, RENOVATE TROTTER FOR BEHAVIOR AND MEMORY UNIT, OAHU										
			DESIGN	130		130								
			CONSTRUCTION	1,070		254	816							
			TOTAL	1,200		384	816							
			G.O. BONDS	1,200		384	816							
242406			REPLACEMENT	LEAHI HOSPITAL, REPLACE FIRE ALARM SYSTEM, OAHU										
			DESIGN	10		10								
			CONSTRUCTION	579		579								
			EQUIPMENT	350		350								
			TOTAL	939		939								
			G.O. BONDS	939		939								

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

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 11-12	FY 12-13	FY 13-14	FY 14-15		FY 15-16	FY 16-17
242408			REPLACEMENT	LEAHI HOSPITAL, REPLACE WATER SHUT-OFF VALVE & FIRE SPRINKLER HEAD FOR ENTIRE CAMPUS, OAHU										
			DESIGN	80						80				
			CONSTRUCTION	542						542				
			TOTAL	622						622				
			G.O. BONDS	622						622				
242409			RENOVATION	LEAHI HOSPITAL, REROOF ADMINISTRATION BUILDING AND COVERED WALKS, OAHU										
			DESIGN	46						46				
			CONSTRUCTION	273						273				
			TOTAL	319						319				
			G.O. BONDS	319						319				
242412	0-16		RENOVATION	LEAHI HOSPITAL, SPALLING REPAIRS & REPAINTING OF TROTTER SINCLAIR AND MAINTENANCE, OAHU										
			DESIGN	115						115				
			CONSTRUCTION	866						866				
			TOTAL	981						981				
			G.O. BONDS	981						981				
242413			OTHER	LEAHI HOSPITAL, RESURFACE DRIVEWAYS & PARKING LOTS & RENOVATE FOR ADA ACCESS, OAHU										
			DESIGN	40						40				
			CONSTRUCTION	210						210				
			TOTAL	250						250				
			G.O. BONDS	250						250				

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

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 11-12	FY 12-13	FY 13-14	FY 14-15		FY 15-16	FY 16-17
242414			REPLACEMENT	LEAHI HOSPITAL, REPLACE DETERIORATED SEWER AND DRAINAGE LINES, OAHU										
			DESIGN	25						25				
			CONSTRUCTION	111						111				
			TOTAL	136						136				
			G.O. BONDS	136						136				
295099			OTHER	HAWAII HEALTH SYSTEMS CORPORATION, HEALTH AND SAFETY PROJECTS, STATEWIDE										
			DESIGN	2		1	1							
			CONSTRUCTION	29,996		14,998	14,998							
			EQUIPMENT	2		1	1							
			TOTAL	30,000		15,000	15,000							
			G.O. BONDS	30,000		15,000	15,000							
350001			REPLACEMENT	HILO MEDICAL CENTER, LONG TERM CARE BUILDING REPLACEMENT, HAWAII										
			PLANS	750				750						
			CONSTRUCTION	4,650						4,650				
			TOTAL	5,400				750		4,650				
			G.O. BONDS	5,400				750		4,650				
350004			REPLACEMENT	HILO MEDICAL CENTER, REPLACEMENT OF LAUNDRY WASHERS / DRYERS, HAWAII										
			PLANS	160		160								
			EQUIPMENT	1,590				1,590						
			TOTAL	1,750		160		1,590						
			G.O. BONDS	1,750		160		1,590						

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

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 11-12	FY 12-13	FY 13-14	FY 14-15		FY 15-16	FY 16-17
350007			RENOVATION	HILO MEDICAL CENTER, ACUTE HOSPITAL REPAIRS, HAWAII										
			PLANS	552				552						
			CONSTRUCTION	12,378			1,052	4,448	6,878					
			TOTAL	12,930			1,052	5,000	6,878					
			G.O. BONDS	12,930			1,052	5,000	6,878					
350016			REPLACEMENT	HILO MEDICAL CENTER, UPGRADE AIR CONDITIONING SYSTEM AND DUCT WORK, HAWAII										
			PLANS	400			400							
			CONSTRUCTION	3,600					3,600					
			TOTAL	4,000			400		3,600					
			G.O. BONDS	4,000			400		3,600					
350018			REPLACEMENT	HILO MEDICAL CENTER, REPLACEMENT OF WALK-IN REFRIGERATOR / FREEZER, HAWAII										
			PLANS	160			160							
			EQUIPMENT	1,611					1,611					
			TOTAL	1,771			160		1,611					
			G.O. BONDS	1,771			160		1,611					
350400			OTHER	HILO MEDICAL CENTER, INSTALLATION OF PATIENT SECURITY SYSTEMS, HAWAII										
			EQUIPMENT	750					750					
			TOTAL	750					750					
			G.O. BONDS	750					750					



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

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 11-12	FY 12-13	FY 13-14	FY 14-15		FY 15-16	FY 16-17
350401			OTHER	HILO MEDICAL CENTER, UPGRADE / REPLACEMENT OF FIRE ALARM & FIRE SUPPRESSION SYSTEMS, HAWAI										
			DESIGN	150					150					
			CONSTRUCTION	700					700					
			TOTAL	850					850					
			G.O. BONDS	850					850					
350402			RENOVATION	HILO MEDICAL CENTER, RENOVATE PARKING LOT, HAWAII										
			PLANS	235			235							
			CONSTRUCTION	2,162					2,162					
			TOTAL	2,397			235		2,162					
			G.O. BONDS	2,397			235		2,162					
350405			REPLACEMENT	HILO MEDICAL CENTER, CT RENOVATION AND REPLACEMENT, HAWAII										
			DESIGN	200					200					
			CONSTRUCTION	800					800					
			EQUIPMENT	3,500					3,500					
			TOTAL	4,500					4,500					
			G.O. BONDS	4,500					4,500					
351001			RENOVATION	HALE HO'OLA HAMAKUA, UPGRADES TO HOSPITAL AND COTTAGES, HAWAII										
			DESIGN	110			110							
			TOTAL	110			110							
			G.O. BONDS	110			110							

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

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 11-12	FY 12-13	FY 13-14	FY 14-15	FY 15-16	FY 16-17		FY 17-18	FY 18-19
352001			REPLACEMENT	KAU HOSPITAL, PLUMBING UPGRADE, HAWAII										
			DESIGN	199			199							
			TOTAL	199			199							
			G.O. BONDS	199			199							
353401			RENOVATION	KOHALA HOSPITAL, REPAVE PARKING LOT AND DRIVEMAY, HAWAII										
			DESIGN	49			49							
			CONSTRUCTION	326			326							
			TOTAL	375			375							
			G.O. BONDS	375			375							
353402			OTHER	KOHALA HOSPITAL, FACILITY REPAIRS, HAWAII										
			DESIGN	42			42							
			CONSTRUCTION	253			253							
			TOTAL	295			295							
			G.O. BONDS	295			295							
354401			NEW	KONA COMMUNITY HOSPITAL, MASTER FACILITY PLANNING, HAWAII										
			PLANS	500			500							
			DESIGN	250					250					
			TOTAL	750			500		250					
			G.O. BONDS	750			500		250					

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

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 11-12	FY 12-13	FY 13-14	FY 14-15	FY 15-16	FY 16-17	
354402			REPLACEMENT	KONA COMMUNITY HOSPITAL, EMERGENCY POWER		UPGRADE, PHASE II, HAWAII						
			DESIGN	200		200						
			CONSTRUCTION	1,800		1,800						
			TOTAL	2,000		2,000						
			G.O. BONDS	2,000		2,000						
354405			RENOVATION	KONA COMMUNITY HOSPITAL, CEILING MITIGATION, PHASE II, HAWAII								
			DESIGN	130		130						
			CONSTRUCTION	1,070		1,070						
			TOTAL	1,200		1,200						
			G.O. BONDS	1,200		1,200						
354406			RENOVATION	KONA COMMUNITY HOSPITAL, NEW MAINTENANCE AND EMERGENCY DISASTER EQUIPMENT BUILDING, HAWAII								
			DESIGN	50		50						
			CONSTRUCTION	450		450						
			TOTAL	500		500						
			G.O. BONDS	500		500						
354407			RENOVATION	KONA COMMUNITY HOSPITAL, UPGRADE ELECTRICAL, HAWAII								
			DESIGN	222		222						
			CONSTRUCTION	2,028		2,028						
			TOTAL	2,250		2,250						
			G.O. BONDS	2,250		2,250						

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

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 11-12	FY 12-13	FY 13-14	FY 14-15		FY 15-16	FY 16-17
355002			RENOVATION	MAUI MEMORIAL MEDICAL CNTR, AIR CONDITIONING	SYSTEM REPLACEMENT AND UPGRADE, MAUI									
			DESIGN	730	430	200				100				
			CONSTRUCTION	5,420	4,170	150	200	500		400				
			EQUIPMENT	4,050	2,000	450	600	500		500				
			TOTAL	10,200	6,600	800	800	1,000		1,000				
			G.O. BONDS	10,200	6,600	800	800	1,000		1,000				
355003			RENOVATION	MAUI MEMORIAL MEDICAL CTR, UPGRADE PLUMBING	INCLUDING FIRE PROTECTION UPGRADES, MAUI									
			DESIGN	538	238					300				
			CONSTRUCTION	5,572	2,272					3,300				
			EQUIPMENT	1,300	400					900				
			TOTAL	7,410	2,910					4,500				
			G.O. BONDS	7,410	2,910					4,500				
355004			RENOVATION	MAUI MEMORIAL MEDICAL CENTER, IMAGING, LAB	AND ONCOLOGY RENOVATION AND EXPANSION, MAUI									
			DESIGN	475		375	100							
			CONSTRUCTION	5,325		1,425	1,400	2,500						
			EQUIPMENT	3,500		1,500	1,000	1,000						
			TOTAL	9,300		3,300	2,500	3,500						
			G.O. BONDS	9,300		3,300	2,500	3,500						
355006			RENOVATION	MAUI MEMORIAL MEDICAL CENTER, LIFE SAFETY	UPGRADES, MAUI									
			DESIGN	200		200								
			CONSTRUCTION	480		480								
			EQUIPMENT	1,000		1,000								
			TOTAL	1,680		1,680								
			G.O. BONDS	1,680		1,680								

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

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 11-12	FY 12-13	FY 13-14	FY 14-15		FY 15-16	FY 16-17
355008			RENOVATION	MAUI MEMORIAL MEDICAL CENTER, INFORMATION	TECHNOLOGY INFRASTRUCTURE AND SECURITY, MAUI									
			DESIGN	500						500				
			CONSTRUCTION	500						500				
			EQUIPMENT	1,000						1,000				
			TOTAL	2,000						2,000				
			G.O. BONDS	2,000						2,000				
355009			RENOVATION	MAUI MEMORIAL MEDICAL CENTER, REPAIRS TO	FACILITY, MAUI									
			DESIGN	350						350				
			CONSTRUCTION	3,750						3,750				
			EQUIPMENT	900						900				
			TOTAL	5,000						5,000				
			G.O. BONDS	5,000						5,000				
355132			REPLACEMENT	MAUI MEMORIAL MEDICAL CENTER, PATIENT ROOM	IMPROVEMENTS, MAUI									
			EQUIPMENT	1,400			700			700				
			TOTAL	1,400			700			700				
			G.O. BONDS	1,400			700			700				
371004			REPLACEMENT	KULA HOSPITAL, CESSPOOLS CLOSURE, MAUI										
			DESIGN	1						1				
			CONSTRUCTION	499						499				
			EQUIPMENT	500						500				
			TOTAL	1,000						1,000				
			G.O. BONDS	1,000						1,000				

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

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 11-12	FY 12-13	FY 13-14	FY 14-15	FY 15-16	FY 16-17		FY 17-18	FY 18-19			
371400			RENOVATION	KULA HOSPITAL, ASBESTOS AND LEAD PAINT													
			DESIGN		1												
			CONSTRUCTION		298												
			EQUIPMENT		1												
			<b>TOTAL</b>		<b>300</b>												
			<b>G.O. BONDS</b>		<b>300</b>												
<b>PROGRAM TOTALS</b>																	
			PLANS		6,359		2	1,055	4,802	500							
			DESIGN		7,729	1,758	403	785	1,829	2,954							
			CONSTRUCTION		135,058	16,092	25,623	37,275	19,564	31,854	4,650						
			EQUIPMENT		28,903	2,858	1,452	3,001	8,022	13,570							
			<b>TOTAL</b>		<b>178,049</b>	<b>20,708</b>	<b>27,480</b>	<b>42,116</b>	<b>34,217</b>	<b>48,878</b>	<b>4,650</b>						
			<b>G.O. BONDS</b>		<b>178,049</b>	<b>20,708</b>	<b>27,480</b>	<b>42,116</b>	<b>34,217</b>	<b>48,878</b>	<b>4,650</b>						

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

PROGRAM ID **HTH-430**PROGRAM STRUCTURE NO. **050302**PROGRAM TITLE **ADULT MENTAL HEALTH - INPATIENT**

PROJECT NUMBER	PRIORITY NUMBER	LOC	SCOPE	PROJECT TITLE		BUDGET PERIOD						SUCCEED YEARS		
				PROJECT TOTAL	PRIOR YRS	FY 11-12	FY 12-13	FY 13-14	FY 14-15	FY 15-16	FY 16-17		FY 17-18	FY 18-19
430142	5		RENOVATION	HAWAII STATE HOSPITAL, REPAIRS AND										
			DESIGN		2,030		1,430	300	300					
			CONSTRUCTION		13,634		10,184	2,500	950					
			TOTAL		15,664		11,614	2,800	1,250					
			G.O. BONDS		15,664		11,614	2,800	1,250					
PROGRAM TOTALS														
			PLANS		2		2							
			LAND		1		1							
			DESIGN		3,903		1,873	1,430	300	300				
			CONSTRUCTION		26,274		12,640	10,184	2,500	950				
			EQUIPMENT		1		1							
			TOTAL		30,181		14,517	11,614	2,800	1,250				
			G.O. BONDS		30,181		14,517	11,614	2,800	1,250				

STATE OF HAWAII

REQUIRED CAPITAL APPROPRIATIONS - BY CAPITAL PROJECT  
IN THOUSANDS OF DOLLARS

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PROGRAM ID HTH-440

PROGRAM STRUCTURE NO. 050303

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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 11-12	FY 12-13	FY 13-14	FY 14-15		FY 15-16	FY 16-17	FY 17-18
PROGRAM TOTALS														
				CONSTRUCTION	674	674								
				EQUIPMENT	1	1								
				TOTAL	675	675								
				G.O. BONDS	675	675								



STATE OF HAWAII

PROGRAM ID HTH-501

PROGRAM STRUCTURE NO. 050305

PROGRAM TITLE DEVELOPMENTAL DISABILITIES

REQUIRED CAPITAL APPROPRIATIONS - BY CAPITAL PROJECT  
IN THOUSANDS OF DOLLARS

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PROJECT NUMBER	PRIORITY NUMBER	LOC	SCOPE	PROJECT TITLE	BUDGET PERIOD						SUCCEED YEARS	
					PROJECT TOTAL	PRIOR YRS	FY 11-12	FY 12-13	FY 13-14	FY 14-15		FY 15-16
PROGRAM TOTALS												
				PLANS	250	250						
				DESIGN	375	375						
				CONSTRUCTION	1,375	-1,375						
				TOTAL	2,000	2,000						
				G.O. BONDS	2,000	2,000						

STATE OF HAWAII

REQUIRED CAPITAL APPROPRIATIONS - BY CAPITAL PROJECT  
IN THOUSANDS OF DOLLARS

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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 11-12	FY 12-13	FY 13-14	FY 14-15	FY 15-16		FY 16-17
PROGRAM TOTALS													
				DESIGN	54	54							
				CONSTRUCTION	546	546							
				TOTAL	600	600							
				G.O. BONDS	600	600							

STATE OF HAWAII

REQUIRED CAPITAL APPROPRIATIONS - BY CAPITAL PROJECT  
IN THOUSANDS OF DOLLARS

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PROGRAM ID **HTH-710**

PROGRAM STRUCTURE NO. **050402**

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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 11-12	FY 12-13	FY 13-14	FY 14-15		FY 15-16
PROGRAM TOTALS												
			DESIGN		62	62						
			CONSTRUCTION		1,272	1,272						
			TOTAL		1,334	1,334						
			G.O. BONDS		1,334	1,334						

STATE OF HAWAII

REQUIRED CAPITAL APPROPRIATIONS - BY CAPITAL PROJECT  
IN THOUSANDS OF DOLLARS

REPORT B78

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 11-12	FY 12-13	FY 13-14	FY 14-15	FY 15-16	FY 16-17	
PROGRAM TOTALS												
			DESIGN	36	36							
			CONSTRUCTION	214	214							
			TOTAL	250	250							
			G.O. BONDS	250	250							

HTH-907

050504

GENERAL ADMINISTRATION

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

PROJECT NUMBER	PRIORITY NUMBER	LOC	SCOPE	PROJECT TITLE		BUDGET PERIOD						SUCCEED YEARS		
						PROJECT TOTAL	PRIOR YRS	FY 11-12	FY 12-13	FY 13-14	FY 14-15		FY 15-16	FY 16-17
907141	4		RENOVATION	DEPARTMENT OF HEALTH, HEALTH AND SAFETY,	STATEWIDE									
			DESIGN			848		495	350		3			
			CONSTRUCTION			15,346		3,633	9,778		1,935			
			TOTAL			16,194		4,128	10,128		1,938			
			G.O. BONDS			16,194		4,128	10,128		1,938			
907142	6		RENOVATION	DEPARTMENT OF HEALTH, ENERGY EFFICIENCY	IMPROVEMENTS, STATEWIDE									
			DESIGN			1,097	331	466		300				
			CONSTRUCTION			4,918	2,757	1,751		410				
			TOTAL			6,015	3,088	2,217		710				
			G.O. BONDS			6,015	3,088	2,217		710				
907143	3		RENOVATION	WAIMANO RIDGE, IMPROVEMENTS TO BUILDINGS AND	SITE, OAHU									
			DESIGN			218			218					
			CONSTRUCTION			2,000			2,000					
			TOTAL			2,218			2,218					
			G.O. BONDS			2,218			2,218					
907146	7		RENOVATION	DEPARTMENT OF HEALTH, REPAIRS AND	IMPROVEMENTS, STATEWIDE									
			DESIGN			1,996	978	827		191				
			CONSTRUCTION			17,608	10,158	6,338		1,112				
			TOTAL			19,604	11,136	7,165		1,303				
			G.O. BONDS			19,604	11,136	7,165		1,303				

STATE OF HAWAII

REQUIRED CAPITAL APPROPRIATIONS - BY CAPITAL PROJECT  
IN THOUSANDS OF DOLLARS

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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		
					PROJECT TOTAL	PRIOR YRS	FY 11-12	FY 12-13	FY 13-14	FY 14-15		FY 15-16	FY 16-17
PROGRAM TOTALS													
				PLANS	725	725							
				DESIGN	8,500	5,650	1,788	759	303				
				CONSTRUCTION	83,883	56,926	11,722	12,890	2,345				
				TOTAL	93,108	63,301	13,510	13,649	2,648				
				G.O. BONDS	93,108	63,301	13,510	13,649	2,648				

STATE OF HAWAII

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

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PROGRAM ID **HTH-904**

PROGRAM STRUCTURE NO. **060402**

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PROGRAM TITLE **EXECUTIVE OFFICE ON AGING**

PROJECT NUMBER	PRIORITY NUMBER	LOC	SCOPE	PROJECT TITLE		BUDGET PERIOD						SUCCEED YEARS		
						PROJECT TOTAL	PRIOR YRS	FY 11-12	FY 12-13	FY 13-14	FY 14-15		FY 15-16	FY 16-17
P11040			RENOVATION	PALOLO CHINESE HOME, DAHU										
			CONSTRUCTION	1,250		500	750							
			TOTAL	1,250		500	750							
			G.O. BONDS	1,250		500	750							
PROGRAM TOTALS														
			PLANS	205	205									
			LAND	150	150									
			DESIGN	630	630									
			CONSTRUCTION	3,265	2,015	500	750							
			TOTAL	4,250	3,000	500	750							
			G.O. BONDS	4,250	3,000	500	750							