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## HEALTH

PROGRAM TITLE:

HEALTH

12/5/20

PROGRAM-ID:

PROGRAM STRUCTURE NO: 05

	FISCAL YEAR 2019-20				THREE MONTHS ENDED 09-30-20				NINE MONTHS ENDING 06-30-21			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
<b>PART I: EXPENDITURES &amp; POSITIONS</b>												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES (\$1,000's)												
OPERATING COSTS												
POSITIONS	5,294.37	4,970.12	- 324.25	6	5,277.17	5,079.92	- 197.25	4	5,277.17	5,272.12	- 5.05	0
EXPENDITURES (\$1000's)	1,540,397	1,283,103	- 257,294	17	340,262	310,076	- 30,186	9	1,130,079	1,189,165	+ 59,086	5
TOTAL COSTS												
POSITIONS	5,294.37	4,970.12	- 324.25	6	5,277.17	5,079.92	- 197.25	4	5,277.17	5,272.12	- 5.05	0
EXPENDITURES (\$1000's)	1,540,397	1,283,103	- 257,294	17	340,262	310,076	- 30,186	9	1,130,079	1,189,165	+ 59,086	5
	FISCAL YEAR 2019-20				FISCAL YEAR 2020-21							
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%				
PART II: MEASURES OF EFFECTIVENESS												
1. MORTALITY RATE (PER THOUSAND)	8	7.9	- 0.1	1	8	8.2	+ 0.2	2				
2. AVERAGE LIFE SPAN OF RESIDENTS	82.4	82.4	+ 0	0	82.4	82.4	+ 0	0				

# VARIANCE REPORT NARRATIVE FY 2020 AND FY 2021

**PROGRAM TITLE: HEALTH**

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**05**

## **PART I - EXPENDITURES AND POSITIONS**

Specific variances are discussed in detail in the lowest level program narratives.

## **PART II - MEASURES OF EFFECTIVENESS**

No significant variance.



# VARIANCE REPORT NARRATIVE FY 2020 AND FY 2021

**PROGRAM TITLE: HEALTH RESOURCES**

**05 01**

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## **PART I - EXPENDITURES AND POSITIONS**

Specific variances are discussed in detail in the lowest level program narratives.

## **PART II - MEASURES OF EFFECTIVENESS**

Item 1. The planned data was input incorrectly, should be 99.

Item 4. The planned data was input incorrectly, should be 95.

	FISCAL YEAR 2019-20				THREE MONTHS ENDED 09-30-20				NINE MONTHS ENDING 06-30-21			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
<b>PART I: EXPENDITURES &amp; POSITIONS</b>												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES (\$1,000's)												
OPERATING COSTS												
POSITIONS	302.87	262.87	- 40.00	13	282.87	251.87	- 31.00	11	282.87	279.87	- 3.00	1
EXPENDITURES (\$1000's)	83,433	51,510	- 31,923	38	17,898	22,562	+ 4,664	26	33,739	50,111	+ 16,372	49
TOTAL COSTS												
POSITIONS	302.87	262.87	- 40.00	13	282.87	251.87	- 31.00	11	282.87	279.87	- 3.00	1
EXPENDITURES (\$1000's)	83,433	51,510	- 31,923	38	17,898	22,562	+ 4,664	26	33,739	50,111	+ 16,372	49
	FISCAL YEAR 2019-20				FISCAL YEAR 2020-21							
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%				
PART II: MEASURES OF EFFECTIVENESS												
1. NEW ACTIVE TB CASE RATE PER 100,000 RESIDENTS	8.1	7	- 1.1	14	8.1	7.2	- 0.9	11				
2. ACTIVE TB CASES - PROPORNTN COMPL RECOM THERAPY (%)	87	98	+ 11	13	87	98	+ 11	13				
3. HANSEN'S DIS NEW CASE RATE PER 100,000 RES 5 YRS+	1	1.13	+ 0.13	13	1	1.13	+ 0.13	13				
4. % OF REPTD VACCINE PREVENTBLE DISEASES INVESTIGATD	100	100	+ 0	0	100	100	+ 0	0				
5. NO. OF NEW HIV CASES (PER 100,000) PER YEAR	8	3.3	- 4.7	59	8	3.3	- 4.7	59				

# VARIANCE REPORT NARRATIVE FY 2020 AND FY 2021

**PROGRAM TITLE: COMMUNICABLE DISEASE & PUBLIC HEALTH NURSING**

**05 01 01**

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## **PART I - EXPENDITURES AND POSITIONS**

Specific variances are discussed in detail in the lowest level program narratives.

## **PART II - MEASURES OF EFFECTIVENESS**

Item 1. The variance was largely due a decrease in immigrants from the Philippines.

Item 2. The planned data was input incorrectly, it should be 99.

Item 3. The variance is normally wide from year to year due to the small base number.

Item 5. The variance reflected effective Human Immunodeficiency Virus (HIV) prevention activities, particularly linking and retaining HIV patients in care.

PROGRAM TITLE:

COMMUNICABLE DISEASE & PUBLIC HEALTH NURSING

12/5/20

PROGRAM-ID:

HTH-100

PROGRAM STRUCTURE NO:

05010101

	FISCAL YEAR 2019-20				THREE MONTHS ENDED 09-30-20				NINE MONTHS ENDING 06-30-21			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
<b>PART I: EXPENDITURES &amp; POSITIONS</b>												
<b>RESEARCH &amp; DEVELOPMENT COSTS</b>												
<b>POSITIONS</b>												
<b>EXPENDITURES (\$1,000's)</b>												
<b>OPERATING COSTS</b>												
<b>POSITIONS</b>	256.87	224.87	- 32.00	12	236.87	214.87	- 22.00	9	236.87	236.87	+ 0.00	0
<b>EXPENDITURES (\$1000's)</b>	47,197	38,223	- 8,974	19	15,290	12,073	- 3,217	21	25,916	29,133	+ 3,217	12
<b>TOTAL COSTS</b>												
<b>POSITIONS</b>	256.87	224.87	- 32.00	12	236.87	214.87	- 22.00	9	236.87	236.87	+ 0.00	0
<b>EXPENDITURES (\$1000's)</b>	47,197	38,223	- 8,974	19	15,290	12,073	- 3,217	21	25,916	29,133	+ 3,217	12

	FISCAL YEAR 2019-20				FISCAL YEAR 2020-21			
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%
<b>PART II: MEASURES OF EFFECTIVENESS</b>								
1. NEW ACTIVE TB CASE RATE PER 100,000 RESIDENTS	8.1	7	- 1.1	14	8.0	7.2	- 0.8	10
2. % ACTIVE TB CASES COMPLETING RECOMMENDED THERAPY	99	98	- 1	1	99	98	- 1	1
3. % NON-ACTIVE TB CASES COMPLETG RECOMMENDED THERAPY	86	91.5	+ 5.5	6	87	88	+ 1	1
4. CHLAMYDIA CASE RATE WOMEN AGE 18-25 PER 100,000	4200	4758	+ 558	13	4200	4800	+ 600	14
5. NEWLY REPORTED HIV CASES PER 100,000	6.5	3.3	- 3.2	49	6.5	3.3	- 3.2	49
6. NEWLY DIAGNOSED HANSEN'S DISEASE CASES PER 100,000	1	1.13	+ 0.13	13	1	1.13	+ 0.13	13
7. % OUTPATIENTS W/NEW COMPLICATIONS FR HANSEN'S DIS	.4	0.36	- 0.04	10	.4	0.36	- 0.04	10
8. ANNL KALAUPAPA REGISTRY PATIENT CARE/RESIDENT DAYS	1900	2506	+ 606	32	1800	2506	+ 706	39
9. % COMPLETED NURSING CONSULTATIONS FOR DOE STUDENTS	100	100	+ 0	0	100	100	+ 0	0
10. % PHN ENROLLD ELDERS >60YR W/O FALL RE HOSPITALZNS	95	99	+ 4	4	95	95	+ 0	0

<b>PART III: PROGRAM TARGET GROUP</b>								
1. RESIDENT POPULATION, STATE OF HAWAII (IN THOUS)	1600	1416	- 184	12	1650	1416	- 234	14
2. CONTACTS OF INFECTIOUS TB CASES	730	1019	+ 289	40	720	1020	+ 300	42
3. CLASS B IMMIGRANTS	550	389	- 161	29	550	100	- 450	82
4. WOMEN 18-25 YEARS OF AGE	70000	63461	- 6539	9	70000	65000	- 5000	7
5. CONTACTS OF HIV CASES FR DOH HIV COUNSEL/TESTG SVC	27	41	+ 14	52	27	25	- 2	7
6. PATIENTS ON THE KALAUPAPA REGISTRY	11	12	+ 1	9	11	12	+ 1	9
7. CONTACTS OF HANSEN'S DISEASE CASES	1120	1183	+ 63	6	1120	1183	+ 63	6
8. OUTPATIENTS W/HANSEN'S DISEASE-RELATED DISABILITIE	110	110	+ 0	0	110	110	+ 0	0
9. CHILDREN IN DOE SCHOOLS	185270	179331	- 5939	3	185270	180000	- 5270	3
10. POPULATION > 60 YEARS OLD	328000	396492	+ 68492	21	329000	395000	+ 66000	20

<b>PART IV: PROGRAM ACTIVITY</b>								
1. # INDIVIDUALS RECEIVG COUNSELG/EVALUATION/SCREENG	85000	75049.3	- 9950.7	12	85000	80630.3	- 4369.7	5
2. # INDV RCVG EVAL FOR SUSPECTD EXPOSURE TO COMM DIS	10000	7288	- 2712	27	10000	8537	- 1463	15
3. # INDIVIDUALS RECEIVG TREATMENT FOR COMM DISEASES	4000	2309	- 1691	42	4000	2628	- 1372	34
4. # OUTPATIENT VISITS/EVAL BY PHYS/NURSES/SW/PARAMED	100000	122287	+ 22287	22	100000	109579	+ 9579	10
5. # LABORATORY TESTS OBTAINED AND REVIEWED	30000	26166	- 3834	13	30000	26315	- 3685	12
6. # WOMEN 18-25 YEARS OLD SCREENED FOR CHLAMYDIA	5500	4596	- 904	16	5500	4500	- 1000	18
7. # PATIENTS PROVIDED HIV-RELATD DRUG TREATMT ASSIST	400	468	+ 68	17	400	450	+ 50	13
8. # STERILE SYRINGES EXCHANGED	1000000	1400481	+ 400481	40	1000000	1400000	+ 400000	40
9. # PHN CONTACTS COMPLETG CONSULTS FOR DOE STUDENTS	17000	13465	- 3535	21	17000	13000	- 4000	24
10. # OF PHN CONTACTS FOR PHN-ENROLLED ELDERS > 60 Y/O	6000	5938	- 62	1	6000	6000	+ 0	0

# VARIANCE REPORT NARRATIVE FY 2020 AND FY 2021

05 01 01 01  
HTH 100

## **PROGRAM TITLE: COMMUNICABLE DISEASE & PUBLIC HEALTH NURSING**

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### **PART I - EXPENDITURES AND POSITIONS**

In FY 2019-20: The position variance was primarily due to many positions held from recruitment due to the freeze in recruitment and budget restriction. The expenditure variance was primarily attributed to federal grants budgeted to begin new project periods.

In FY 2020-21: For the first three months of FY 21, the position variance was primarily due to many positions held from recruitment due to the hiring freeze and the budget restriction. The expenditure variance was due primarily to the late availability of allotment and hiring freeze.

### **PART II - MEASURES OF EFFECTIVENESS**

Item 1. The variances are largely due to a decrease in immigrants from the Philippines.

Item 4. The variances are due to increasing Chlamydia incidence.

Item 5. The variances reflect effective human immunodeficiency virus (HIV) prevention activities, particularly linking and retaining HIV patients in care.

Item 6. The variances are normally wide from year to year due to a small base number.

Item 7. The variances reflect proactive nursing care management to prevent or control Hansen's disease reactions with timely medical management.

Item 8. The variances are due to additional patients now requiring 24/7 care.

### **PART III - PROGRAM TARGET GROUPS**

Item 1. The variances are due to an overestimate of Hawaii resident population growth in previous years. The planned value will be adjusted but takes two years to appear in future variance reports.

Item 2. The variances are due to staff training and increased effectiveness.

Item 3. The variances are due to a reduction in Class B immigrants to Hawaii resulting from a change in federal immigration policy.

Item 5. The variance in FY 2019-20 was due to increased capacity, which resulted in an increase in HIV interviews and referrals of high-risk individuals.

Item 10. The positive variance was due to increased growth in the elderly population.

### **PART IV - PROGRAM ACTIVITIES**

Item 1. The variance in FY 2019-20 was due to decreased screening evaluations related to the pandemic shutdown.

Item 2. The variances are primarily due to updating tuberculosis (TB) administrative rules requiring fewer TB tests and x-ray services.

Item 3. The variances are primarily due to the pandemic shutdown of the sexually transmitted disease (STD) clinic, which also impacted field investigations and treatment.

Item 4. The variances are partially due to improved data collection by the Public Health Nursing Branch (PHNB) that began three years ago; an updated baseline will be available next year. Total outpatient visits and evaluations from the previous two years have increased progressively by 5.3% and 3.1%, largely attributable to PHNB activities.

Item 5. The variances are primarily due to a reduction in STD and TB tests.

Item 6. The variances are associated with decreased routine clinical screening in women during the COVID-19 pandemic.

## VARIANCE REPORT NARRATIVE FY 2020 AND FY 2021

05 01 01 01  
HTH 100

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**PROGRAM TITLE: COMMUNICABLE DISEASE & PUBLIC HEALTH NURSING**

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Item 7. The variances are due to job loss associated with the COVID-19 pandemic, resulting in an increased demand for assistance in accessing HIV treatment.

Item 8. The variances are due to an increase in outreach contacts, outreach visits and number of syringes exchanged per visit.

Item 9. The variances are due to school closures during the COVID-19 pandemic.

PROGRAM TITLE:

DISEASE OUTBREAK CONTROL

12/5/20

PROGRAM-ID:

HTH-131

PROGRAM STRUCTURE NO:

05010102

	FISCAL YEAR 2019-20				THREE MONTHS ENDED 09-30-20				NINE MONTHS ENDING 06-30-21			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
<b>PART I: EXPENDITURES &amp; POSITIONS</b>												
<b>RESEARCH &amp; DEVELOPMENT COSTS</b>												
<b>POSITIONS</b>												
<b>EXPENDITURES (\$1,000's)</b>												
<b>OPERATING COSTS</b>												
<b>POSITIONS</b>	46.00	38.00	- 8.00	17	46.00	37.00	- 9.00	20	46.00	43.00	- 3.00	7
<b>EXPENDITURES (\$1000's)</b>	36,236	13,287	- 22,949	63	2,608	10,489	+ 7,881	302	7,823	20,978	+ 13,155	168
<b>TOTAL COSTS</b>												
<b>POSITIONS</b>	46.00	38.00	- 8.00	17	46.00	37.00	- 9.00	20	46.00	43.00	- 3.00	7
<b>EXPENDITURES (\$1000's)</b>	36,236	13,287	- 22,949	63	2,608	10,489	+ 7,881	302	7,823	20,978	+ 13,155	168
	<b>FISCAL YEAR 2019-20</b>				<b>FISCAL YEAR 2020-21</b>							
	<b>PLANNED</b>	<b>ACTUAL</b>	<b>± CHANGE</b>	<b>%</b>	<b>PLANNED</b>	<b>ESTIMATED</b>	<b>± CHANGE</b>	<b>%</b>				
<b>PART II: MEASURES OF EFFECTIVENESS</b>												
1. % E.COLI, HAV, ETC. INVESTIGATED 24HRS AFTR RPT	100	100	+ 0	0	100	100	+ 0	0				
2. % RPTD FOODBORNE DIS. OUTBREAK W/ ETIOLOGY ID	100	100	+ 0	0	100	100	+ 0	0				
3. % CHILDREN AGE 5 YEARS MEETING IMMUNIZATION REQ	95	93	- 2	2	95	95	+ 0	0				
4. % ADOLESCENTS MEETING IMMUNIZATION REQUIREMENTS	0	0	+ 0	0	0	0	+ 0	0				
5. % HBV CARRIERS' INFANTS WHO START HBV VAX SERIES	95	100	+ 5	5	95	95	+ 0	0				
<b>PART III: PROGRAM TARGET GROUP</b>												
1. # HAWAII RESIDENTS (1000'S)	1431	1415	- 16	1	1431	1415	- 16	1				
2. # VISITORS TO HAWAII (1000'S)	0	7293	+ 7293	0	0	7293	+ 7293	0				
3. # CHILDREN AGE FIVE YEARS (1000'S)	17	17	+ 0	0	17	17	+ 0	0				
4. # OF ADOLESCENTS (1000'S)	0	143	+ 143	0	0	143	+ 143	0				
5. # OF BIRTHS EXCLUDING MILITARY (100'S)	150	142	- 8	5	150	150	+ 0	0				
6. # CHILDREN BORN TO HEP B SURF ANTGN+ WOMEN (100'S)	1.5	1.3	- 0.2	13	1.5	1.5	+ 0	0				
<b>PART IV: PROGRAM ACTIVITY</b>												
1. # HI RESIDENTS ENTERED, MAINTAINED IN IMMUN REGISTRY	1043572	1052521	+ 8949	1	1043572	1095751	+ 52179	5				
2. # SCH CHILDN SURVEYED FOR IMMUN COVERAGE (1000'S)	17	16	- 1	6	17	17	+ 0	0				
3. # PERINATAL HEPATITIS B INFECTED INFANTS	0	0	+ 0	0	0	0	+ 0	0				
4. # INFECTIOUS DISEASE CASES INVESTIGATED	5000	23034	+ 18034	361	5000	5000	+ 0	0				
5. # INFECTIOUS DISEASE OUTBREAKS IDENTIFIED	15	196	+ 181	1207	15	15	+ 0	0				

# VARIANCE REPORT NARRATIVE FY 2020 AND FY 2021

05 01 01 02  
HTH 131

## **PROGRAM TITLE: DISEASE OUTBREAK CONTROL**

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### **PART I - EXPENDITURES AND POSITIONS**

Programs continue to experience challenges in recruiting, hiring, and retaining qualified individuals given the noncompetitive civil service salaries.

The FY 20 variance in expenditures was primarily attributed to federal grants budgeted to begin new project periods. The FY 21 variance in expenditures is primarily attributed to additional COVID-19 funding.

### **PART II - MEASURES OF EFFECTIVENESS**

Item 4. COVID-19 impacts on school attendance have hampered our ability to collect data for this measure in the short-term. We plan to collect data on adolescent immunization rates from schools once they begin to open to in-person learning and will be able to provide the data. In the meantime, we will explore proxy measures, such as numbers of vaccines ordered by providers. These data will be important in the next couple of years to evaluate how well the new vaccine requirement has been implemented.

### **PART III - PROGRAM TARGET GROUPS**

Item 2. The number of visitors to Hawaii had increased 10% above the prior three-year average in fiscal year 2018-19 but has dropped by 24% in 2020. This change is due to restrictions on travel implemented as part of the response to COVID-19. This has impacted our program in numerous ways, including the need to investigate COVID-19 cases and identify and report on those potentially related to travel in order to inform policy. This is particularly important because of the critical role tourism plays in the economy of Hawaii and economic recovery.

Item 4. We are now reporting the number of adolescents (ages 10-18) in Hawaii as a target population that should benefit from recent administrative rule changes. The rule changes were proposed and promoted by our program to increase vaccination coverage rates among an age group that has historically seen gaps in coverage for vaccines recommended by the Advisory Committee on Immunization Practices.

Item 6. The number of children born to hepatitis B surface antigen positive women varies year to year, but the goal with the hepatitis B vaccination program is to reduce the number of women who are carriers of hepatitis B and who are giving birth. A reduction compared to what is expected is what we would like to see annually.

### **PART IV - PROGRAM ACTIVITIES**

Item 1. The registry is an ongoing repository of data that will continue to increase, although the increase year to year is difficult to predict.

Item 3. There is no good way to predict the number of infants that will be infected with hepatitis B. We can only report actuals each year.

Item 4. An increase in the number of infectious disease cases investigated largely reflects the large amount of COVID-19 related cases.

Item 5. An increase in the number of infectious disease outbreaks identified largely reflects improvements in the foodborne outbreak complaint system as well as our ability to respond to and actively follow up on complaints, which increased the ability of the program to identify and investigate potential outbreaks. During 2020, outbreaks related to COVID-19 have also been identified. Data through July 2020 does not yet fully reflect the substantial increase in the number of outbreaks investigated related to COVID-19.



# VARIANCE REPORT NARRATIVE FY 2020 AND FY 2021

05 01 03  
HTH 730

## **PROGRAM TITLE: EMERGENCY MEDICAL SVCS & INJURY PREV SYS**

### **PART I - EXPENDITURES AND POSITIONS**

Permanent positions vacant as of June 30, 2020, were a Research Statistician III (Position No. (PN) 49793), Public Health Educator V (PN 41807), Office Assistant III (PN 47153) and Public Health Educator IV (PN 121173). Permanent positions vacant as of September 30, 2020, were a Public Health Educator V (PN 41807) and a Public Health Educator IV (PN 121173). The variance in FY 20 expenditures was primarily due to delays in executing two contracts planned for FY 20 to deconstruct a tower for the MEDICOM system on the island of Kauai and a tower for the MEDICOM system on the island of Hawaii, a restriction on general fund spending, and delays in filling four permanent vacant positions and three temporary vacant positions. Deconstruction of the two MEDICOM towers is now on hold for FY 21. Two of the permanent positions vacant in FY 20 and funding for four permanent positions were abolished by the Legislature in the budget for FY 21. Two unfunded permanent positions remain vacant in the first quarter for FY 21. In the first quarter of FY 21, actual expenditures and encumbrance were lower than budgeted primarily due to restrictions in the allotment for the first quarter coupled with delays in execution of contracts and encumbrance for planned expenditures. The funds for encumbrance for contracts and for other services delayed in the first quarter will be moved to the second quarter of FY 21 and are included in the estimate for the nine months ending June 30, 2021.

### **PART II - MEASURES OF EFFECTIVENESS**

5. The number of community coalitions and partnerships fluctuates based on program needs and community interest. For FY 20, the program maintained activity with the current coalitions and partnerships, instead of the planned decrease in activity for FY 20. For FY 21, the program plans to maintain current activity.

6. For FY 20, the program's plans for scheduled training were largely affected by health concerns with COVID-19. Complete training data for FY 20 is not available currently. For FY 21, the program's plans continue to be developed, with modifications to address continuing health concerns with COVID-19.

7. Actual data for FY 20 was not available. Data sources for numerators are death certificates, Hawaii Health Information Corporation hospital records (from 7/2012 through 12/2015), and Laulima hospital records (from 1/2016 through 6/2019). Only deaths and hospital presentations among residents were included, limited to victims ten years of age and older. Hospital records of patients who died or who were transferred were excluded, along with patients without an injury-related principal diagnosis. Rates were adjusted to the 2000 U.S. population standard, using 14 age groups. Data was only available through FY 19, as death certificate and Laulima data were only available through calendar year 2019. Rates for FY 20 and FY 21 were projected by linear regression using actual data from FY 13 through FY 19.

### **PART III - PROGRAM TARGET GROUPS**

2. The decrease in high risk cardiac cases was believed to have a correlation with the decrease in the number of ambulance calls during the period.

7. There currently are only two licensed Air Ambulance Service Providers. A previous licensed Air Ambulance Service Provider sold their interest to another existing licensed Air Ambulance Service Provider. It is undetermined whether there will be an increase in licensed Air Ambulance Service Providers in FY 21.

### **PART IV - PROGRAM ACTIVITIES**

3. The decrease in actual from planned staff-days for data collection and evaluation for FY 20 and estimated from planned for FY 21 are attributed to the vacant Research Statistician III position (PN 49793) in FY 20 and the abolishment of the position in FY 21.

## VARIANCE REPORT NARRATIVE FY 2020 AND FY 2021

05 01 03  
HTH 730

**PROGRAM TITLE: EMERGENCY MEDICAL SVCS & INJURY PREV SYS**

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6. The decrease in percentage of revenue collected is due to the variability in the patient mix of insured and uninsured.

9. For FY 20, the program's plans for scheduled training were largely affected by health concerns with COVID-19. Complete training data for FY 20 is not available currently. For FY 21, the program's plans continue to be developed, with modifications to address continuing health concerns with COVID-19.

10. The number of community coalitions and partnerships fluctuates based on program needs and community interest. For FY 20, the program maintained activity with the current coalitions and partnerships, instead of the planned decrease in activity for FY 20. For FY 21, the program plans to maintain current activity.

PROGRAM TITLE:

FAMILY HEALTH SERVICES

12/5/20

PROGRAM-ID:

HTH-560

PROGRAM STRUCTURE NO:

050104

	FISCAL YEAR 2019-20				THREE MONTHS ENDED 09-30-20				NINE MONTHS ENDING 06-30-21			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
<b>PART I: EXPENDITURES &amp; POSITIONS</b>												
<b>RESEARCH &amp; DEVELOPMENT COSTS</b>												
<b>POSITIONS</b>												
<b>EXPENDITURES (\$1,000's)</b>												
<b>OPERATING COSTS</b>												
<b>POSITIONS</b>	259.50	208.50	- 51.00	20	249.50	231.50	- 18.00	7	249.50	234.50	- 15.00	6
<b>EXPENDITURES (\$1000's)</b>	102,301	95,673	- 6,628	6	38,762	38,762	+ 0	0	60,749	60,749	+ 0	0
<b>TOTAL COSTS</b>												
<b>POSITIONS</b>	259.50	208.50	- 51.00	20	249.50	231.50	- 18.00	7	249.50	234.50	- 15.00	6
<b>EXPENDITURES (\$1000's)</b>	102,301	95,673	- 6,628	6	38,762	38,762	+ 0	0	60,749	60,749	+ 0	0

	FISCAL YEAR 2019-20				FISCAL YEAR 2020-21			
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%
<b>PART II: MEASURES OF EFFECTIVENESS</b>								
1. % PRETERM BIRTHS	10.5	10.5	+ 0	0	10.5	10	- 0.5	5
2. % UNINSURED INDV REC SUBSIDIZED PRIMARY CARE - POS	32.6	24.92	- 7.68	24	32.6	24.92	- 7.68	24
3. % CHILDREN (0-21) W/SP HTH CARE NEEDS W/MEDICAL HM	95	98.3	+ 3.3	3	95	95	+ 0	0
4. % LIVE BIRTHS SCRND FOR METAB DISORDERS & HEMOGLOB	99	96	- 3	3	99	99	+ 0	0
5. % WIC ENROLL WOMEN & CHILDN TO 5 YRS RCV EDC, COUN	85	82	- 3	4	85	85	+ 0	0
6. % WIC ENROLLED WOMEN WHO INITIATE BREASTFEEDING	90	86.6	- 3.4	4	90	90	+ 0	0
7. % PRENATAL SMOKING	4.9	4.7	- 0.2	4	4.9	5	+ 0.1	2
8. % FEMALES 15-24 TESTED FOR CHLAMYDIA WITHIN 12 MO	58	53	- 5	9	58	58	+ 0	0
9. % CHILDN 0-3 YRS W/ DEVELOP DELAYS RCVG EI SVCS	3.05	3.6	+ 0.55	18	3.05	3.1	+ 0.05	2
10. % CHILDN ENROLLED IN HOME VISITG PROG W/ MEDI HOME	94	97	+ 3	3	94	94	+ 0	0

<b>PART III: PROGRAM TARGET GROUP</b>								
1. # LIVE BIRTHS	17500	17700	+ 200	1	17500	17700	+ 200	1
2. # UNINSURED INDIVIDUALS	52800	56479	+ 3679	7	52800	56479	+ 3679	7
3. # CHILDREN WITH SPECIAL HEALTH NEEDS	41000	38816	- 2184	5	41000	40000	- 1000	2
4. # LIVE BIRTHS (SCREENED FOR METABOLIC DISORDERS)	18000	16865	- 1135	6	18000	18000	+ 0	0
5. # WIC ENROLLED WOMEN & CHILDN UP TO 5 YRS OLD	32500	29484	- 3016	9	33000	30958	- 2042	6
6. # WIC ENROLLED PREGNANT & POST-PARTUM WOMEN	7800	6878	- 922	12	7800	7222	- 578	7
7. # PREGNANT WOMEN	1050	1070	+ 20	2	1050	1100	+ 50	5
8. # FEMALES 15-24 YRS OLD SERVED THRU POS CONTRACTS	88578	88678	+ 100	0	88578	88600	+ 22	0
9. # CHILDN 0-3 YRS W/DEV DELAYS EVAL CUR YR RCV EIS	3550	3286	- 264	7	3550	3550	+ 0	0
10. # CHILDREN ENROLLED IN A HOME VISITING PROGRAM	675	532	- 143	21	675	675	+ 0	0

<b>PART IV: PROGRAM ACTIVITY</b>								
1. # PREG WOMEN SRVD BY WIC & PERINATAL SUP POS CONTR	2740	2610	- 130	5	2740	2672	- 68	2
2. # UNINSURED INDV RCVD DOH SUBSIDIZED PRIM CARE POS	17204	14076	- 3128	18	17204	14076	- 3128	18
3. # CSHN 0-21 ASSISTED IN ACCESS TO MEDICAL SPC SVCS	1250	1143	- 107	9	1250	1150	- 100	8
4. # INFANTS SCREENED FOR METAB DISORDERS & HEMOGLOB	475	433	- 42	9	475	450	- 25	5
5. # NUTRIT EDUC CONTACTS/COUNSELG SESS WIC ENROLLEES	17600	19100	+ 1500	9	17600	19200	+ 1600	9
6. # PRENATAL/POSTPARTUM BREASTFDG INFO CONTACTS	7800	6878	- 922	12	7800	7222	- 578	7
7. # PREGNANT WOMEN SERVED BY WIC 7 PERINATAL SUP POS	1000	923	- 77	8	1000	800	- 200	20
8. # FEMALES 15-24YRS TESTED CHLAMYDIA IN PAST 12 MOS	5200	4900	- 300	6	5200	5200	+ 0	0
9. # CHILDN 0-3 YRS W/DEV DELAYS RECEIVING EIS	1700	1708	+ 8	0	1700	1700	+ 0	0
10. # CHILDN ENROLLED IN HOME VISTG PRG W/MEDICAL HOME	635	517	- 118	19	635	635	+ 0	0

# VARIANCE REPORT NARRATIVE FY 2020 AND FY 2021

05 01 04  
HTH 560

## **PROGRAM TITLE: FAMILY HEALTH SERVICES**

### **PART I - EXPENDITURES AND POSITIONS**

The variances in position counts for FY 20 and for the first quarter of FY 21 were primarily due to difficulties in filling position vacancies in the Women, Infants, and Children (WIC) Branch and the Early Intervention (EI) Services Program. By the end of FY 21, the Family Health Services Division anticipates reducing vacancies by filling multiple positions currently pending approval to fill.

There is a \$6,628,000 variance in FY 20 expenditures (6%) that can primarily be attributed to fewer than budgeted positions due to difficulties filling position vacancies as well as contract expenditures being recorded in FY 21 due to delays in contract execution.

### **PART II - MEASURES OF EFFECTIVENESS**

Item 2. The lower number of individuals seeking primary care services due to COVID-19 resulted in the percentage of uninsured individuals receiving subsidized primary care purchase of service (POS) services to be lower than estimated.

Item 9. The percent of children ages 0-3 years receiving EI services may have increased due to COVID-19 and the EI Section's implementation of partial Multidisciplinary Evaluations and determinations of "presumed eligible" while in-person visits were suspended. "Presumed eligible" means that based on the information received, a child may receive EI services until eligibility can be determined with a formal developmental evaluation during an in-person visit.

### **PART III - PROGRAM TARGET GROUPS**

Item 6. The decrease in the number of WIC enrolled pregnant and postpartum women was consistent with a national trend in decreased enrollment attributable to decreased birthrates.

Item 10. The Home Visiting Program had begun transitioning services from two communities to establish services in two new communities that have increased needs. The Ewa-Kalaleoa and Lihue communities no longer receive home visiting services, and the Department of Health had begun working with families in Wahiawa on Oahu and Koloa on Kauai. During this transition, fewer children were served. Additionally, the Waianae community had been receiving services from two separate agencies, and with a new contract effective July 1, 2020, Waianae is being served by a single agency, resulting in the temporary reduction of the number of children enrolled in home visiting. The COVID-19 pandemic had prevented in-person screenings of new families in birthing hospitals, resulting in fewer screenings and enrollment of new families.

### **PART IV - PROGRAM ACTIVITIES**

Item 2. The number of uninsured individuals receiving subsidized primary care POS services was lower in FY 20 due to less people seeking services due to COVID-19.

Items 6 and 7. The decrease in the number of WIC enrolled pregnant and postpartum women was consistent with a national trend in decreased enrollment attributable to decreased birthrates.

Item 10. The Home Visiting Program had begun transitioning services from two communities to establish services in two new communities that have increased needs. The Ewa-Kalaleoa and Lihue communities no longer receive home visiting services, and the Department of Health had begun working with families in Wahiawa on Oahu and Koloa on Kauai. During this transition, fewer children were served. Additionally, the Waianae community had been receiving services from two separate agencies, and with a new contract effective July 1, 2020, Waianae is being served by a single agency, resulting in the temporary reduction of the number of children enrolled in home visiting. The COVID-19 pandemic had prevented in-person screenings of new families in birthing hospitals, resulting in fewer screenings and enrollment of new families.

PROGRAM TITLE:

CHRONIC DISEASE PREVENTION & HEALTH PROMOTION

12/5/20

PROGRAM-ID:

HTH-590

PROGRAM STRUCTURE NO:

050105

	FISCAL YEAR 2019-20				THREE MONTHS ENDED 09-30-20				NINE MONTHS ENDING 06-30-21			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
<b>PART I: EXPENDITURES &amp; POSITIONS</b>												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES (\$1,000's)												
<b>OPERATING COSTS</b>												
POSITIONS	51.00	44.00	- 7.00	14	50.00	44.00	- 6.00	12	50.00	50.00	+ 0.00	0
EXPENDITURES (\$1000's)	64,076	52,144	- 11,932	19	13,987	11,083	- 2,904	21	49,546	52,450	+ 2,904	6
<b>TOTAL COSTS</b>												
POSITIONS	51.00	44.00	- 7.00	14	50.00	44.00	- 6.00	12	50.00	50.00	+ 0.00	0
EXPENDITURES (\$1000's)	64,076	52,144	- 11,932	19	13,987	11,083	- 2,904	21	49,546	52,450	+ 2,904	6

	FISCAL YEAR 2019-20				FISCAL YEAR 2020-21			
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%
<b>PART II: MEASURES OF EFFECTIVENESS</b>								
1. % YTH/ADULTS MTG PHYSICAL ACTIVITY RECOMMENDATIONS	54.6	53.4	- 1.2	2	55.1	55.1	+ 0	0
2. % YTH/ADULTS CONSUME < 3 DAILY SERV'G FRUITS/VEGS	80	51.4	- 28.6	36	79.2	79.2	+ 0	0
3. % YOUTH & ADULTS WHO USE TOBACCO PRODUCTS	15.9	18.1	+ 2.2	14	15.7	15.7	+ 0	0
4. % ADULTS WHOSE HYPERTENSION IS UNDER CONTROL	69.6	63.1	- 6.5	9	70.2	70.2	+ 0	0
5. % ADULTS WHO RCV'D RECOMMENDED BLOOD-SUGAR SCREE	52.4	65.3	+ 12.9	25	52.9	52.9	+ 0	0
6. % INDLS 5-64YR W/ASTHMA SERVED BY FQHCS W/MEDICTIO	86.4	82.5	- 3.9	5	87.2	87.2	+ 0	0
7. % ADULTS 50-75 RCV'D RECOM COLORECTAL CANCER SCRNG	72.7	75.1	+ 2.4	3	73.4	73.4	+ 0	0
8. % ADULTS WHOSE DIABETES HBA1C VALUE IS > THAN 9.0%	71	65.1	- 5.9	8	71.7	71.7	+ 0	0
9. % WOMEN 50+ RCV'D RECOM BREAST CANCER SCREENING	79.4	87.	+ 7.6	10	80.1	80.1	+ 0	0
10. % BABIES EXCLUSIVELY BREASTFED THROUGH 3 MONTHS	55.9	57.4	+ 1.5	3	56.4	56.4	+ 0	0

<b>PART III: PROGRAM TARGET GROUP</b>								
1. TOTAL # OF HAWAII RESIDENTS	1463340	1415872	- 47468	3	1481241	1481241	+ 0	0
2. TOTAL # OF CHILDREN ATTENDING HI DOE SCHOOLS	173922	167454	- 6468	4	176836	176836	+ 0	0
3. TOTAL # OF LOW-INCOME INDIVIDUALS IN HAWAII	352954	286616	- 66338	19	357272	357272	+ 0	0
4. TOTAL # OF YOUTH & ADULT TOBACCO USERS	199991	222364	+ 22373	11	200095	200095	+ 0	0
5. TOTAL # OF ADULTS WITH HYPERTENSION	373687	373861	+ 174	0	381492	381492	+ 0	0
6. TOTAL # OF ADULTS WITH DIABETES	122616	128340	+ 5724	5	125177	125177	+ 0	0
7. TOTAL # OF INDIVIDUALS WITH ASTHMA	158216	134375	- 23841	15	161722	161722	+ 0	0
8. TOTAL # OF YOUTH/ADULTS WHO ARE OVERWEIGHT/OBESE	663707	681895	+ 18188	3	664094	664094	+ 0	0
9. TOTAL # ADULT ELIG FOR COLORECTAL CANCER SCRNNINGS	387200	426089	+ 38889	10	387200	387200	+ 0	0
10. TOTAL # OF LIVE BIRTHS.	18449	17026	- 1423	8	18674	18674	+ 0	0

<b>PART IV: PROGRAM ACTIVITY</b>								
1. # ADULTS REACHED THRU SOCIAL-MARKETG CAMPAIGNS	286219	279001	- 7218	3	289360	289360	+ 0	0
2. # OF COALITIONS SUPPORTED BY THE PROGRAMS	28	48	+ 20	71	28	28	+ 0	0
3. % DOE SCHOOLS MEETING WELLNESS GUIDELINES	86.3	84.5	- 1.8	2	87.1	87.1	+ 0	0
4. # OF WEBSITE VISITS TO HHDW, HI HEALTH MATTERS, ET	61853	74475	+ 12622	20	62459	62459	+ 0	0
5. # OF YOUTHS&ADULTS REACHED THRU CESSATION SERVICES	2305	1068	- 1237	54	2329	2329	+ 0	0
6. # PPL REACHED THRU CHRON DIS PRV & SELFMGMT PRGS	5341	3010	- 2331	44	5393	5393	+ 0	0
7. # TRAININGS FOR COMM PARTNERS ON CHRONIC DIS PRVTN	520	549	+ 29	6	520	520	+ 0	0
8. # PART.S REACHED THRU CHRONIC DIS. PRVTN. TRNINGS	13900	8676	- 5224	38	13900	13900	+ 0	0
9. % ELIGIBLE WOMEN SCREENED THRU BCCCP	4.2	4.8	+ 0.6	14	4.2	4.2	+ 0	0
10. # SITES USING HEALTHY FOOD GUIDELINES	154	152	- 2	1	156	156	+ 0	0

# VARIANCE REPORT NARRATIVE FY 2020 AND FY 2021

05 01 05  
HTH 590

## **PROGRAM TITLE: CHRONIC DISEASE PREVENTION & HEALTH PROMOTION**

### **PART I - EXPENDITURES AND POSITIONS**

FY 2019-20 Positions/14% variance: Vacancies were attributed to pending approvals to fill (Position Nos. (PNs) 121723 and 1100185); updating of position descriptions till hiring could resume (PNs 24047, 30538, and 26596); and pending funding changes (PNs 50691 and 50690).

FY 2019-20 Expenditures/19% variance: The program was late in completing the transfer of tobacco settlement special funds in FY 20 and completed the following in FY 21 Q1: \$4,764,428.40 - Tobacco Prevention and Control Trust Fund and \$4,921,385.67 - Emergency and Budget Reserve Fund.

FY 2020-21 Q1 Positions/12% variance: Recent vacancies were attributed to recent retirements (PNs 50692 and 2984); internal promotion (PN 121364); exit from state (PN 121319); ongoing recruitment (PN 50690); and funding change (PN 50691).

FY 2020-21 Q1 Expenditures/21% variance: Two new federal grant awards and allotments were established in the latter part of Q1, and there was insufficient time for conducting expenditures (S-21-506 and S-21-642); delays executing contracts for ongoing cancer screening, heart disease & stroke, and diabetes management services (S-17-604 and S-15-586).

### **PART II - MEASURES OF EFFECTIVENESS**

Item 2: The percentage of youth and adults eating less than the recommended daily serving of fruits and vegetables was 35.75% lower than targeted. The indicator will likely decrease over time due to increased efforts to promote healthy eating. However, the greater change is likely due to a change in the indicator definition, aligning with the current national guidelines: the proportion of youth and adults consuming less than three fruits and vegetables per day in the past month.

Item 3: The percentage of youth and adults who use tobacco products was 13.84% higher than targeted. The increased tobacco use was primarily in priority populations, e.g., adult cigarette use in Native Hawaiians from 19.6% to 22.3%; lesbian, gay, bisexual, and transgender from 19.0% to 21.6%; low educational attainment from 22.0% to 26.4%; low income from 17.6% to 22.1%; and with depression from 23.8% to 25.5% (Behavioral Risk Factor Surveillance System 2017-2018), and contributing was the rising use of electronic smoking devices (ESD) used by youth and young adults. The program continues to strongly support ESD policies as proven public health intervention.

Item 5: The percentage of adults who received a recommended blood-sugar screening was 24.62% higher than targeted. Increased diabetes screening promotions contributed; however, an outdated target based on a different indicator definition (proportion of adults who do not have diabetes receiving a blood sugar test in the past three years) likely also contributed. The program is updating the indicator to: proportion of adults aged 40-70 years who are overweight/obese who do not have diabetes and report receiving a blood sugar test in the past three years, reflecting current national guidelines. The program is urging adults to get screened and manage their diabetes due to the COVID-19 associated risks.

Item 9: The percentage of women who received recommended breast cancer screening was 9.57% higher than targeted (target: 79.40%; actual 87.0%). The actual findings are based on the latest surveillance results available, which was collected during 2018, and prior to the pandemic. Contributing factors to the increase in women meeting the recommended breast cancer screening include increased engagement with health plans to use population-based strategies to encourage members to meet recommended health screenings, improving adoption of electronic health records for referrals.

# VARIANCE REPORT NARRATIVE FY 2020 AND FY 2021

05 01 05  
HTH 590

## **PROGRAM TITLE: CHRONIC DISEASE PREVENTION & HEALTH PROMOTION**

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### **PART III - PROGRAM TARGET GROUPS**

Item 3: The number of low-income individuals was 18.8% lower than targeted. This likely reflects normal annual variation, but these results are too early to reflect the negative impact of COVID-19 on Hawaii's economy.

Item 4: The number of youth and adult tobacco users was 11.19% higher than targeted. Please see Part II, Item 3, for more explanation on the increase.

Item 7: The number of individuals with asthma was 15.07% lower than targeted. Contributing factors may include increased access to quality asthma care, proper medication, self-management education, and strict tobacco- and smoke-free policies.

Item 9: The number of adults eligible for a colorectal cancer screening was 10.04% higher than targeted. Eligibility is defined as adults ages 50-75 years old, and Hawaii is aging: 50-75-year-old adults were 30.1% (N = 426,089 people) of the total population in 2019, 29.9% (N = 425,085 people) in 2018, and 28.6% (N = 406,410 people) in 2014.

### **PART IV - PROGRAM ACTIVITIES**

Item 2: The number of coalitions was 71.43% higher than targeted. New coalitions were formed across programs, particularly in nutrition, physical activity, and school health.

Item 4: The number of website visits to the Hawaii Health Data Warehouse (HHDW), Hawaii Health Matters (HHM), and HealthyHawaii.com was 20.41% higher than targeted. New resources were released through the HHDW/HHM websites, including Community Snapshots & Health Topics Modules. The increase in social marketing to encourage healthy living during COVID-19 increased visits to the sites.

Item 5: The number of youth and adults reached through tobacco cessation services was 53.67% lower than targeted. Declining rates align with rising ESD use. Cessation services are to be revamped to match changing tobacco consumption.

Item 6: The number of individuals reached through chronic disease prevention and self-management programs was 43.64% lower than targeted. Contributing was the loss of funding for asthma programs, impact of COVID-19 on enrollment, and change in focus by the U.S. Department of Agriculture on Supplemental Nutrition Assistance Program Education from direct education to policy, system, and environmental change strategies.

Item 8: The number of community partners reached through chronic disease prevention trainings was 37.58% lower than targeted. COVID-19 safety measures broadly impacted programs with planned in-person trainings and transitioning to online formats.

Item 9: The number of eligible women screened through Board Certified Critical Care Pharmacist was 14.29% higher than targeted. Higher unemployment due to COVID-19 may have led to more women losing their health insurance and becoming eligible (40-64 years old and less or equal to 250% poverty level).

PROGRAM TITLE:

HEALTH RESOURCES ADMINISTRATION

12/5/20

PROGRAM-ID:

HTH-595

PROGRAM STRUCTURE NO:

050106

	FISCAL YEAR 2019-20				THREE MONTHS ENDED 09-30-20				NINE MONTHS ENDING 06-30-21						
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%			
<b>PART I: EXPENDITURES &amp; POSITIONS</b>															
RESEARCH & DEVELOPMENT COSTS															
POSITIONS															
EXPENDITURES (\$1,000's)															
OPERATING COSTS															
POSITIONS	13.00	8.00	-	5.00	38	13.00	8.00	-	5.00	38	13.00	9.00	-	4.00	31
EXPENDITURES (\$1000's)	2,048	1,657	-	391	19	340	313	-	27	8	1,353	1,380	+	27	2
TOTAL COSTS															
POSITIONS	13.00	8.00	-	5.00	38	13.00	8.00	-	5.00	38	13.00	9.00	-	4.00	31
EXPENDITURES (\$1000's)	2,048	1,657	-	391	19	340	313	-	27	8	1,353	1,380	+	27	2
	FISCAL YEAR 2019-20				FISCAL YEAR 2020-21										
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%							
PART II: MEASURES OF EFFECTIVENESS															
1. % MOE HRA PROG SHOWING BENEFICIAL CHGS (PL VS ACT)	80	90	+	10	13	80	90	+	10	13	80	90	+	10	13
2. AVG TURNAROUND TIME TO ISSUE MED CANNABIS CARDS	9	5	-	4	44	9	5	-	4	44	9	5	-	4	44
3. % MED CANN CARDS ISSUED TO PATIENTS W/DEB MED COND	3	3	+	0	0	3	3	+	0	0	3	3	+	0	0
4. % DISPENSARIES INSPECTED AT LEAST QTRLY	100	100	+	0	0	100	100	+	0	0	100	100	+	0	0
5. % DISPENSARIES THAT REMAIN IN COMPLIA W/HAR 11-850	100	100	+	0	0	100	100	+	0	0	100	100	+	0	0
6. % DISPENSARIES' LICENSES RENEWED	100	100	+	0	0	100	100	+	0	0	100	100	+	0	0
PART III: PROGRAM TARGET GROUP															
1. PERSONNEL IN HEALTH RESOURCES ADMINISTRATION	904.32	840.77	-	63.55	7	904.32	799.57	-	104.75	12	904.32	799.57	-	104.75	12
2. ALL IN-STATE MED CANN REGISTRY APPLICANTS IN SFY	30756	30811	+	55	0	36907	31232	-	5675	15	36907	31232	-	5675	15
3. ALL IND W/DEB MED COND APPLY FOR CANN CARD IN SFY	1177	2128	+	951	81	1236	2260	+	1024	83	1236	2260	+	1024	83
4. LICENSED MEDICAL CANNABIS DISPENSARIES	8	8	+	0	0	8	8	+	0	0	8	8	+	0	0

# VARIANCE REPORT NARRATIVE FY 2020 AND FY 2021

05 01 06  
HTH 595

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**PROGRAM TITLE: HEALTH RESOURCES ADMINISTRATION**

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**PART I - EXPENDITURES AND POSITIONS**

FY 20: The variances in position count and expenditures were the result of vacancies in five Office of Medical Cannabis Control and Regulation (OMCCR) positions, including four newly established positions and one Registry Program Specialist IV. The new positions were established between September 2019 and January 2020 and have not been filled because the positions are unfunded in FY 21.

FY 21: The variance in position count is the result of the continued vacancies in the five OMCCR positions. OMCCR anticipates filling the Registry Program Specialist IV vacancy by the end of the second quarter.

**PART II - MEASURES OF EFFECTIVENESS**

Item 1. The variance is attributed to continued efforts to improve outcomes.

Item 2. For FY 20, the outcome was better than we anticipated. The average planned turnaround time was increased due to losing staff and processing applications for out-of-State patients. The vacant positions were filled and processing the out-of-State patient applications did not have as big of an impact on managing both types of applications submitted. FY 21 has been adjusted per the FY 20 outcome.

**PART III - PROGRAM TARGET GROUPS**

Item 1. For FY 21, the variance is attributed to position reductions per Act 5, SLH 2019, as amended by Act 9, SLH 2020.

Item 2. For FY 21, the planned number of valid patients was overestimated.

Item 3. The number of minor patients and patients with "priority" debilitating medical conditions increased more than anticipated likely due to the abundance of information available regarding the potential benefits cannabis may have in alleviating symptoms of these conditions and an increasing awareness of the Medical Cannabis Program in Hawaii.

**PART IV - PROGRAM ACTIVITIES**

None.

PROGRAM TITLE:

HOSPITAL CARE

12/5/20

PROGRAM-ID:

PROGRAM STRUCTURE NO: 0502

	FISCAL YEAR 2019-20				THREE MONTHS ENDED 09-30-20				NINE MONTHS ENDING 06-30-21			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
<b>PART I: EXPENDITURES &amp; POSITIONS</b>												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES (\$1,000's)												
OPERATING COSTS												
POSITIONS	2,835.25	2,880.00	+ 44.75	2	2,835.25	2,878.00	+ 42.75	2	2,835.25	2,878.00	+ 42.75	2
EXPENDITURES (\$1000's)	751,152	591,991	- 159,161	21	159,525	136,107	- 23,418	15	591,011	613,487	+ 22,476	4
TOTAL COSTS												
POSITIONS	2,835.25	2,880.00	+ 44.75	2	2,835.25	2,878.00	+ 42.75	2	2,835.25	2,878.00	+ 42.75	2
EXPENDITURES (\$1000's)	751,152	591,991	- 159,161	21	159,525	136,107	- 23,418	15	591,011	613,487	+ 22,476	4
	FISCAL YEAR 2019-20				FISCAL YEAR 2020-21							
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%				
PART II: MEASURES OF EFFECTIVENESS												
1. OCCUPANCY RATE - ACUTE CARE	62.63	65.39	+ 2.76	4	62.63	51.25	- 11.38	18				
2. OCCUPANCY RATE - LONG-TERM CARE	86.59	83.05	- 3.54	4	86.59	91.07	+ 4.48	5				
3. AVERAGE LENGTH OF STAY - ACUTE CARE	5	6.3	+ 1.3	26	5	5.6	+ 0.6	12				
4. AVERAGE LENGTH OF STAY - LONG TERM CARE	257.3	292	+ 34.7	13	257.3	447.9	+ 190.6	74				

# VARIANCE REPORT NARRATIVE FY 2020 AND FY 2021

**PROGRAM TITLE: HOSPITAL CARE**

**05 02**

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## **PART I - EXPENDITURES AND POSITIONS**

Specific variances are discussed in detail in the lowest level program narratives.

## **PART II - MEASURES OF EFFECTIVENESS**

Specific variances are discussed in detail in the lowest level program narratives.

# VARIANCE REPORT

	FISCAL YEAR 2019-20				THREE MONTHS ENDED 09-30-20				NINE MONTHS ENDING 06-30-21			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
<b>PART I: EXPENDITURES &amp; POSITIONS</b>												
<b>RESEARCH &amp; DEVELOPMENT COSTS</b>												
<b>POSITIONS</b>												
<b>EXPENDITURES (\$1,000's)</b>												
<b>OPERATING COSTS</b>												
<b>POSITIONS</b>	54.50	96.00	+ 41.50	76	54.50	96.00	+ 41.50	76	54.50	96.00	+ 41.50	76
<b>EXPENDITURES (\$1000's)</b>	17,509	15,083	- 2,426	14	3,940	3,404	- 536	14	13,569	14,105	+ 536	4
<b>TOTAL COSTS</b>												
<b>POSITIONS</b>	54.50	96.00	+ 41.50	76	54.50	96.00	+ 41.50	76	54.50	96.00	+ 41.50	76
<b>EXPENDITURES (\$1000's)</b>	17,509	15,083	- 2,426	14	3,940	3,404	- 536	14	13,569	14,105	+ 536	4
	FISCAL YEAR 2019-20				FISCAL YEAR 2020-21							
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%				
<b>PART II: MEASURES OF EFFECTIVENESS</b>												
1. BOARD APPROVED OPERATING EXPENSE BUDGET TO ACTUAL	20938	15083	- 5855	28	20938	14619	- 6319	30				

# VARIANCE REPORT NARRATIVE FY 2020 AND FY 2021

05 02 01  
HTH 210

**PROGRAM TITLE: HAWAII HEALTH SYSTEMS CORP - CORP OFFICE**

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## **PART I - EXPENDITURES AND POSITIONS**

The variances in positions are due to the fact that the Hawaii Health Systems Corporation has position control over the establishment of positions, and the budgeted position number of 54.50 was established over 10 years ago and has not been updated since.

The variances in expenditures are due to the EMR (Electronic Medical Records) cost of services and employees who have been transferred to the Kona Community Hospital.

## **PART II - MEASURES OF EFFECTIVENESS**

The variances are due to the planned numbers not being updated, so it reflected the EMR cost of services and employees who have been transferred to the Kona Community Hospital.

## **PART III - PROGRAM TARGET GROUPS**

Not applicable.

## **PART IV - PROGRAM ACTIVITIES**

Not applicable.

PROGRAM TITLE:

KAHUKU HOSPITAL

12/5/20

PROGRAM-ID:

HTH-211

PROGRAM STRUCTURE NO:

050202

	FISCAL YEAR 2019-20				THREE MONTHS ENDED 09-30-20				NINE MONTHS ENDING 06-30-21			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
<b>PART I: EXPENDITURES &amp; POSITIONS</b>												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES (\$1,000's)												
OPERATING COSTS												
POSITIONS	0.00	0.00	+ 0.00	0	0.00	0.00	+ 0.00	0	0.00	0.00	+ 0.00	0
EXPENDITURES (\$1000's)	1,800	1,800	+ 0	0	405	405	+ 0	0	1,395	1,395	+ 0	0
TOTAL COSTS												
POSITIONS	0.00	0.00	+ 0.00	0	0.00	0.00	+ 0.00	0	0.00	0.00	+ 0.00	0
EXPENDITURES (\$1000's)	1,800	1,800	+ 0	0	405	405	+ 0	0	1,395	1,395	+ 0	0
	FISCAL YEAR 2019-20				FISCAL YEAR 2020-21							
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%				
PART II: MEASURES OF EFFECTIVENESS												
1. OCCUPANCY RATE - ACUTE CARE	84.5	94.5	+ 10	12	84.5	94.5	+ 10	12				
2. OCCUPANCY RATE - LONG-TERM CARE	94.25	45.5	- 48.75	52	94.25	0	- 94.25	100				
3. AVERAGE LENGTH OF STAY - ACUTE CARE (DAYS)	38.5	45.2	+ 6.7	17	38.5	45.2	+ 6.7	17				
4. AVERAGE LENGTH OF STAY - LONG-TERM CARE (DAYS)	373.66	304.7	- 68.96	18	373.66	0	- 373.66	100				
5. AVERAGE OPERATING COST PER PATIENT DAY(EXCL EQUIP)	2268.34	2744.4	+ 476.06	21	2268.34	2911.5	+ 643.16	28				
6. AVERAGE PATIENT REVENUE PER PATIENT DAY	4611.59	4818.4	+ 206.81	4	4611.59	6129.7	+ 1518.11	33				
PART III: PROGRAM TARGET GROUP												
1. EST. POPULATION OF SERVICE AREA (RESIDENTS)	22500	22500	+ 0	0	22500	22500	+ 0	0				
PART IV: PROGRAM ACTIVITY												
1. NUMBER OF IN-PATIENT ADMISSIONS - ACUTE CARE	212	224	+ 12	6	212	224	+ 12	6				
2. NUMBER OF IN-PATIENT DAYS - ACUTE CARE	4644	5731	+ 1087	23	4644	5731	+ 1087	23				
3. NUMBER OF EMERGENCY ROOM VISITS	6607.5	6103	- 504.5	8	6607.5	6103	- 504.5	8				
4. NUMBER OF ADMISSIONS - LONG-TERM CARE	4	0	- 4	100	4	0	- 4	100				
5. NUMBER OF PATIENT DAYS - LONG-TERM CARE	2074	0	- 2074	100	2074	0	- 2074	100				

# VARIANCE REPORT NARRATIVE FY 2020 AND FY 2021

05 02 02  
HTH 211

## **PROGRAM TITLE: KAHUKU HOSPITAL**

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### **PART I - EXPENDITURES AND POSITIONS**

No significant variances.

### **PART II - MEASURES OF EFFECTIVENESS**

Items 1, 2, 3, and 4. The variances are due to the conversion of six of its long-term care beds into Swing beds, resulting in a shift in revenue and service distribution.

Items 5 and 6. The variances are due to unplanned service opportunities, like a dental clinic and a clinic in Haleiwa, which resulted in greater expenses and revenues.

### **PART III - PROGRAM TARGET GROUPS**

No significant variances.

### **PART IV - PROGRAM ACTIVITIES**

Items 2, 4 and 5. See Part II, Items 1, 2, 3, and 4.

PROGRAM TITLE:

HAWAII HEALTH SYSTEMS CORPORATION - REGIONS

12/5/20

PROGRAM-ID:

HTH-212

PROGRAM STRUCTURE NO:

050203

	FISCAL YEAR 2019-20				THREE MONTHS ENDED 09-30-20				NINE MONTHS ENDING 06-30-21			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
<b>PART I: EXPENDITURES &amp; POSITIONS</b>												
<b>RESEARCH &amp; DEVELOPMENT COSTS</b>												
<b>POSITIONS</b>												
<b>EXPENDITURES (\$1,000's)</b>												
<b>OPERATING COSTS</b>												
<b>POSITIONS</b>	2,780.75	2,784.00	+ 3.25	0	2,780.75	2,782.00	+ 1.25	0	2,780.75	2,782.00	+ 1.25	0
<b>EXPENDITURES (\$1000's)</b>	704,901	549,108	- 155,793	22	154,392	131,510	- 22,882	15	553,393	576,275	+ 22,882	4
<b>TOTAL COSTS</b>												
<b>POSITIONS</b>	2,780.75	2,784.00	+ 3.25	0	2,780.75	2,782.00	+ 1.25	0	2,780.75	2,782.00	+ 1.25	0
<b>EXPENDITURES (\$1000's)</b>	704,901	549,108	- 155,793	22	154,392	131,510	- 22,882	15	553,393	576,275	+ 22,882	4
	FISCAL YEAR 2019-20				FISCAL YEAR 2020-21							
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%				
<b>PART II: MEASURES OF EFFECTIVENESS</b>												
1. AVERAGE OPERATING COST PER PATIENT DAY (EXCL EQPT)	2268	2637	+ 369	16	2268	1964	- 304	13				
2. AVERAGE PATIENT REVENUE PER PATIENT DAY	1666	1940	+ 274	16	1666	2600	+ 934	56				
3. OCCUPANCY RATE - ACUTE CARE	62.63	65.39	+ 2.76	4	62.63	51.25	- 11.38	18				
4. OCCUPANCY RATE - LONG-TERM CARE	86.59	83.05	- 3.54	4	86.59	91.07	+ 4.48	5				
<b>PART III: PROGRAM TARGET GROUP</b>												
1. EST. POPULATION OF SERVICE AREA - EAST HAWAII	121311	120908	- 403	0	121311	120908	- 403	0				
2. EST. POPULATION OF SERVICE AREA - WEST HAWAII	80873	80605	- 268	0	80873	80605	- 268	0				
3. EST. POPULATION OF SERVICE AREA - MAUI	NO DATA	NO DATA	+ 0	0	NO DATA	NO DATA	+ 0	0				
4. EST. POPULATION OF SERVICE AREA - KAUAI	72520	72293	- 227	0	72520	72437	- 83	0				
5. EST. POPULATION SERVICE AREA OVER 65 - EAST HAWAII	23828	26425	+ 2597	11	23828	26425	+ 2597	11				
6. EST. POPULATION SERVICE AREA OVER 65 - WEST HAWAII	15719	17616	+ 1897	12	15719	17616	+ 1897	12				
7. EST. POPULATION SERVICE AREA OVER 65 - MAUI	NO DATA	NO DATA	+ 0	0	NO DATA	NO DATA	+ 0	0				
8. EST. POPULATION SERVICE AREA OVER 65 - OAHU	169638	177668	+ 8030	5	169638	176780	+ 7142	4				
9. EST. POPULATION SERVICE AREA OVER 65 - KAUAI	13958	14951	+ 993	7	13958	14980	+ 1022	7				
<b>PART IV: PROGRAM ACTIVITY</b>												
1. NUMBER OF IN-PATIENT ADMISSIONS - ACUTE CARE	13145	11558	- 1587	12	13145	10744	- 2401	18				
2. NUMBER OF IN-PATIENT DAYS - ACUTE CARE	65377	72272	+ 6895	11	65377	60422	- 4955	8				
3. NUMBER OF BIRTHS	1836	1647	- 189	10	1836	1452	- 384	21				
4. NUMBER OF ADMISSIONS - LONG-TERM CARE	592	485	- 107	18	592	328	- 264	45				
5. NUMBER OF PATIENT DAYS - LONG-TERM CARE	152329	141643	- 10686	7	152329	146927	- 5402	4				
6. NUMBER OF EMERGENCY ROOM (ER) VISITS	83764	81052	- 2712	3	83764	65164	- 18600	22				

# VARIANCE REPORT NARRATIVE FY 2020 AND FY 2021

05 02 03  
HTH 212

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**PROGRAM TITLE: HAWAII HEALTH SYSTEMS CORPORATION - REGIONS**

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**PART I - EXPENDITURES AND POSITIONS**

The variances in expenditures are due to the transfer of operation of Maui Memorial Medical Center, Kula Hospital and Lanai Community Hospital to Maui Health System, a Kaiser Foundation Hospitals, LLC.

**PART II - MEASURES OF EFFECTIVENESS**

Items 1, 2, and 3 The variances in FY 20 are due to an increase in volume at acute facilities and payor contract increases. The variances in FY 21 can be contributed to patients not visiting the hospitals in fear of the COVID-19 pandemic.

**PART III - PROGRAM TARGET GROUPS**

Items 5 and 6. The population growth on the island of Hawaii can be attributed to an aging population and the affordability. The median cost to purchase a home on the island is less than \$400,000.

**PART IV - PROGRAM ACTIVITIES**

Items 1 and 2. See Part II, Items 1, 2 and 3.

Item 3. The decrease in the number of births is due to a higher planned number than anticipated. Also, families are having fewer children than in previous generations.

Items 4 and 6. The variances can be attributed to patients not visiting the hospitals in fear of the COVID-19 pandemic.

PROGRAM TITLE:

ALII COMMUNITY CARE

12/5/20

PROGRAM-ID:

HTH-213

PROGRAM STRUCTURE NO:

050204

	FISCAL YEAR 2019-20				THREE MONTHS ENDED 09-30-20				NINE MONTHS ENDING 06-30-21			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
<b>PART I: EXPENDITURES &amp; POSITIONS</b>												
<b>RESEARCH &amp; DEVELOPMENT COSTS</b>												
<b>POSITIONS</b>												
<b>EXPENDITURES (\$1,000's)</b>												
<b>OPERATING COSTS</b>												
<b>POSITIONS</b>	0.00	0.00	+ 0.00	0	0.00	0.00	+ 0.00	0	0.00	0.00	+ 0.00	0
<b>EXPENDITURES (\$1000's)</b>	3,500	3,500	+ 0	0	788	788	+ 0	0	2,712	2,712	+ 0	0
<b>TOTAL COSTS</b>												
<b>POSITIONS</b>	0.00	0.00	+ 0.00	0	0.00	0.00	+ 0.00	0	0.00	0.00	+ 0.00	0
<b>EXPENDITURES (\$1000's)</b>	3,500	3,500	+ 0	0	788	788	+ 0	0	2,712	2,712	+ 0	0

**VARIANCE REPORT NARRATIVE  
FY 2020 AND FY 2021**

**05 02 04  
HTH 213**

**PROGRAM TITLE: ALII COMMUNITY CARE**

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**PART I - EXPENDITURES AND POSITIONS**

None.

**PART II - MEASURES OF EFFECTIVENESS**

No measures have been developed for this program.

**PART III - PROGRAM TARGET GROUPS**

No measures have been developed for this program.

**PART IV - PROGRAM ACTIVITIES**

No measures have been developed for this program.

PROGRAM TITLE:

PRIVATE HOSPITALS & MEDICAL SERVICES

12/5/20

PROGRAM-ID:

SUB-601

PROGRAM STRUCTURE NO:

050205

	FISCAL YEAR 2019-20				THREE MONTHS ENDED 09-30-20				NINE MONTHS ENDING 06-30-21			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
<b>PART I: EXPENDITURES &amp; POSITIONS</b>												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES (\$1,000's)												
OPERATING COSTS												
POSITIONS	0.00	0.00	+ 0.00	0	0.00	0.00	+ 0.00	0	0.00	0.00	+ 0.00	0
EXPENDITURES (\$1000's)	942	0	- 942	100	0	0	+ 0	0	942	0	- 942	100
TOTAL COSTS												
POSITIONS	0.00	0.00	+ 0.00	0	0.00	0.00	+ 0.00	0	0.00	0.00	+ 0.00	0
EXPENDITURES (\$1000's)	942	0	- 942	100	0	0	+ 0	0	942	0	- 942	100
	FISCAL YEAR 2019-20				FISCAL YEAR 2020-21							
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%				
PART II: MEASURES OF EFFECTIVENESS												
1. STATE SUBSIDY AS A % OF TOTAL HOSPITAL BUDGET	NO DATA	NO DATA	+ 0	0	NO DATA	NO DATA	+ 0	0				

**VARIANCE REPORT NARRATIVE  
FY 2020 AND FY 2021**

**05 02 05  
SUB 601**

**PROGRAM TITLE: PRIVATE HOSPITALS & MEDICAL SERVICES**

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**PART I - EXPENDITURES AND POSITIONS**

N/A

**PART II - MEASURES OF EFFECTIVENESS**

No data available.

**PART III - PROGRAM TARGET GROUPS**

No measures have been developed for this program.

**PART IV - PROGRAM ACTIVITIES**

No measures have been developed for this program.

PROGRAM TITLE:

MAUI HEALTH SYSTEM, A KFH LLC

12/5/20

PROGRAM-ID:

HTH-214

PROGRAM STRUCTURE NO:

050206

	FISCAL YEAR 2019-20				THREE MONTHS ENDED 09-30-20				NINE MONTHS ENDING 06-30-21			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
<b>PART I: EXPENDITURES &amp; POSITIONS</b>												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES (\$1,000's)												
OPERATING COSTS												
POSITIONS	0.00	0.00	+ 0.00	0	0.00	0.00	+ 0.00	0	0.00	0.00	+ 0.00	0
EXPENDITURES (\$1000's)	22,500	22,500	+ 0	0	0	0	+ 0	0	19,000	19,000	+ 0	0
TOTAL COSTS												
POSITIONS	0.00	0.00	+ 0.00	0	0.00	0.00	+ 0.00	0	0.00	0.00	+ 0.00	0
EXPENDITURES (\$1000's)	22,500	22,500	+ 0	0	0	0	+ 0	0	19,000	19,000	+ 0	0

**VARIANCE REPORT NARRATIVE  
FY 2020 AND FY 2021**

**05 02 06  
HTH 214**

**PROGRAM TITLE: MAUI HEALTH SYSTEM, A KFH LLC**

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**PART I - EXPENDITURES AND POSITIONS**

No significant variances.

**PART II - MEASURES OF EFFECTIVENESS**

No measures have been developed for this program.

**PART III - PROGRAM TARGET GROUPS**

No measures have been developed for this program.

**PART IV - PROGRAM ACTIVITIES**

No measures have been developed for this program.



# VARIANCE REPORT NARRATIVE FY 2020 AND FY 2021

**PROGRAM TITLE: BEHAVIORAL HEALTH**

**05 03**

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## **PART I - EXPENDITURES AND POSITIONS**

Specific variances are discussed in detail in the lowest level program narratives.

## **PART II - MEASURES OF EFFECTIVENESS**

Item 1. The planned data was input incorrectly, should be 49. The variance for FY 20 was due to 1) COVID-19 and adjusting from face to face service administration to telehealth; 2) necessary provider adjustments to adjust and develop workflows and protocols due to COVID-19; and 3) ongoing service adjustments from adolescent providers to better accommodate school schedule changes due to COVID-19.

Item 2. The variance was because prevention programs were not able to complete site-visits for programs on Oahu during the second year of their contracts due to the pandemic.



# VARIANCE REPORT NARRATIVE FY 2020 AND FY 2021

05 03 01  
HTH 420

## **PROGRAM TITLE: ADULT MENTAL HEALTH - OUTPATIENT**

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### **PART I - EXPENDITURES AND POSITIONS**

Fiscal Year 2019-20: At the end of the fiscal year, there were 47.00 vacant positions due to a hiring freeze. The expenditure variance was attributed to vacancy savings and delays in the execution of purchase of service (POS) contracts.

Fiscal Year 2020-21: At the end of the 1st quarter, there were 23.00 vacant positions due to a hiring freeze. The expenditure variance was attributed to vacancy savings and delays in the execution of POS contracts. At the end of the fiscal year, the expenditure variance is attributed to expenditures from non-appropriated federal funds.

### **PART II - MEASURES OF EFFECTIVENESS**

Item 1. Fiscal Year 2019-20: The variance was due to a shift in some group home services being provided in sites other than private residences, resulting in a decrease in the percent of consumers living in a private residence.

### **PART III - PROGRAM TARGET GROUPS**

Item 2. Fiscal Year 2020-21: Variance is projected because more individuals are expected to be served by crisis services due to the COVID-19 pandemic.

### **PART IV - PROGRAM ACTIVITIES**

Item 1. The variances are attributed to an increase in the number of consumers being transitioned to Medicaid QUEST Integration services, resulting in a decrease in the number of consumers served by Community Mental Health Centers (CMHCs).

Item 2. The variances are attributed to an increase in the number of consumers being transitioned to Medicaid QUEST Integration services, resulting in a decrease in the number of consumers served by POS programs.

Item 3. FY 2020-21: The variance is attributed to an increase in the number of consumers being transitioned to Medicaid QUEST Integration services, resulting in a decrease in the number of consumers requesting eligibility determinations so that they can receive services at the CMHCs.

Item 4. The variances are attributed to an increase in the number of consumers being transitioned to Medicaid QUEST Integration services, resulting in a decrease in the number of consumers admitted to the CMHCs for services.

Item 5. The variances are attributed to a decrease in the number of admissions to the CMHCs, resulting in a corresponding decrease in the number of consumers discharged from the CMHCs.

Item 6. The variances are attributed to an increase in the number of consumers being transitioned to Medicaid QUEST Integration services, resulting in a decrease in the number of consumers served by contracted specialized residential service programs.

Item 7. The variances are attributed in an increase the number of available group home beds, resulting in more consumers being served.

PROGRAM TITLE:

ADULT MENTAL HEALTH - INPATIENT

12/5/20

PROGRAM-ID:

HTH-430

PROGRAM STRUCTURE NO:

050302

	FISCAL YEAR 2019-20				THREE MONTHS ENDED 09-30-20				NINE MONTHS ENDING 06-30-21			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
<b>PART I: EXPENDITURES &amp; POSITIONS</b>												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES (\$1,000's)												
<b>OPERATING COSTS</b>												
POSITIONS	650.50	566.50	- 84.00	13	739.00	695.50	- 43.50	6	739.00	739.00	+ 0.00	0
EXPENDITURES (\$1000's)	77,946	77,738	- 208	0	21,006	20,960	- 46	0	61,707	61,753	+ 46	0
<b>TOTAL COSTS</b>												
POSITIONS	650.50	566.50	- 84.00	13	739.00	695.50	- 43.50	6	739.00	739.00	+ 0.00	0
EXPENDITURES (\$1000's)	77,946	77,738	- 208	0	21,006	20,960	- 46	0	61,707	61,753	+ 46	0
	FISCAL YEAR 2019-20				FISCAL YEAR 2020-21							
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%				
<b>PART II: MEASURES OF EFFECTIVENESS</b>												
1. % CLIENTS DISCHARGED TO COMMUNITY-BASED SVCS	77	74	- 3	4	77	74	- 3	4				
2. % CLIENTS TREATED/DISCH W/CONT COMM TENURE > 12 MO	30	34	+ 4	13	31	31	+ 0	0				
3. % CLIENTS TRANSFERRED TO A CONTRACT FACILITY	25	20	- 5	20	27	20	- 7	26				
<b>PART III: PROGRAM TARGET GROUP</b>												
1. # PENAL COMMITMENT PATIENTS	343	320	- 23	7	353	335	- 18	5				
2. # CIVIL COMMITMENT PATIENTS	12	11	- 1	8	12	11	- 1	8				
<b>PART IV: PROGRAM ACTIVITY</b>												
1. # NEW ADMISSIONS	127	115	- 12	9	131	124	- 7	5				
2. # READMISSIONS	223	216	- 7	3	229	223	- 6	3				
3. # DISCHARGES	351	310	- 41	12	361	333	- 28	8				
4. # FORENSIC/COURT-ORDERED ADMISSIONS	363	338	- 25	7	373	352	- 21	6				

# VARIANCE REPORT NARRATIVE FY 2020 AND FY 2021

05 03 02  
HTH 430

## **PROGRAM TITLE: ADULT MENTAL HEALTH - INPATIENT**

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### **PART I - EXPENDITURES AND POSITIONS**

FY 2019-20: The variances in positions and expenditures were due mainly to vacant and unestablished positions.

### **PART II - MEASURES OF EFFECTIVENESS**

Item 2: For FY 2019-20, the percentage of patients discharged with continuous community tenure more than 12 months was 34%, 4% more than the planned percentage of 30%. This higher percentage was due to a decrease in patients who did not meet conditional release requirements.

Item 3: For FY 2019-20, the percentage of clients transferred to a contract facility was 20%, 5% less than the planned percentage of 25%. This lower percentage was due to a decrease in patients who did not meet conditional release requirements.

### **PART III - PROGRAM TARGET GROUPS**

No significant variance.

### **PART IV - PROGRAM ACTIVITIES**

Item 3: For FY 2019-20, the number of discharges was 310, 41 less than the planned number of 351. The lower than projected discharges were the result of a decrease in patients who did not meet conditional release requirements.



# VARIANCE REPORT NARRATIVE FY 2020 AND FY 2021

05 03 03  
HTH 440

## **PROGRAM TITLE: ALCOHOL & DRUG ABUSE DIVISION**

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### **PART I - EXPENDITURES AND POSITIONS**

The FY 20 and FY 21 variances of 8.00 and 9.00 vacant positions are primarily due to the hiring freeze in civil service positions effective April 1, 2020.

The FY 20 and FY 21 variances in expenditures are primarily due to changing the contract time of performance to end on September 30th rather than June 30th and federal grant awards ending on September 29th and 30th annually.

### **PART II - MEASURES OF EFFECTIVENESS**

Item #1. The decreased variance of 27% for FY 20 was due to:  
1) COVID-19 and adjusting from face to face service administration to telehealth; 2) necessary provider adjustments to adjust and develop workflows and protocols due to COVID-19; and 3) ongoing service adjustments from adolescent providers to better accommodate school schedule changes due to COVID-19.

### **PART III - PROGRAM TARGET GROUPS**

No significant variances.

### **PART IV - PROGRAM ACTIVITIES**

Item #2. The increased actual variance of 220% for FY 20 and the estimated variance of 223% for FY 21 are attributed to:  
1) implementation of evidence-based curriculum regardless of funding source; and 2) implementation of effective outreach, recruitment and tracking strategies utilized by prevention providers to increase and sustain program enrollment.

Item #4. The increased actual variance of 16% for FY 20 was due to:  
1) an increase of certified individuals seeking certification;  
2) implementation of virtual training to reach more participants and rural areas.



# VARIANCE REPORT NARRATIVE FY 2020 AND FY 2021

05 03 04  
HTH 460

## **PROGRAM TITLE: CHILD & ADOLESCENT MENTAL HEALTH**

### **PART I - EXPENDITURES AND POSITIONS**

The variance in the number of filled positions was due to a delay in getting a reorganization completed and establishment and filling of Behavioral Health Initiative positions. In April, a hiring freeze was implemented, and the Child and Adolescent Mental Health Division (CAMHD) did have interested people for some of the other vacant positions that were frozen. Also, other staff resigned and retired.

The variance in expenditures was due to outstanding payments that are still due to three agencies that have not billed to date, as CAMHD had a change to its billing system, and vacant positions.

### **PART II - MEASURES OF EFFECTIVENESS**

Item #3. Planned was 4% and actual was 5%. This small percentage makes it hard to stay below a 10% variance. We had two new Community-Based Residential programs (CBRs) added to our system beginning in the summer of 2019, adding 16 beds to our service array. This increased capacity explains the increased use.

Item #6. The average length of stay of CAMHD youth in home-based therapy services was shorter than projected. Cases were being reviewed more regularly by our doctoral level clinicians who meet with Care Coordinators to discuss progress. This led to closer scrutiny of progress being made and termination of services once goals were met.

Item #7. Similarly, the length of stay of CAMHD youth in Therapeutic Foster Homes was shorter than expected. The increased clinical review of cases ensured that services were ended and youth were returned to their families as soon as goals were met. This is a positive variance.

Item #8. The length of stay of CAMHD youth in CBRs also was shorter than expected. The increased clinical review of cases ensured that services were ended and youth were returned to their families as soon as goals were met. This is a positive variance.

### **PART III - PROGRAM TARGET GROUPS**

Item #2. The decrease in the number of youths with educationally-linked treatment could be due to the lack of youth being in school and not being identified for the need for services.

Item #3. CAMHD has changed the collection of data and is now keeping a record of all youth detained at the Detention Home. These numbers need to be revised once changes are allowed to the Variance Report.

Item #4. CAMHD has been able to reach a larger group of youth at a younger age, which has been a goal for many years. By reaching these younger youth and providing services earlier in their lives, there is a better chance of them not escalating to higher needs in mental health care as they get older.

Item #5. CAMHD has reached out and received other sources of funding from other divisions within the Behavioral Health Administration as well as other State agencies. This is positive to the use of State funds, integrating between agencies for the care of the youth.

### **PART IV - PROGRAM ACTIVITIES**

Item #1. The amount of money billed for contracted services was lower than projected due to a new billing system. There were three provider agencies that were unable to bill timely, and a large amount of the billing for them occurred during FY 21 for FY 21 services.

Item #2. The reimbursement monies entered for Med-QUEST contracted services were entered incorrectly. The number should have been 9,600. There still would have been a variance due to the situation listed in Item #1.

Item #3. The variance was due to the same reasons as Items #1 and #2 with the addition of the Memorandum of Agreement and the Sales and Purchase Agreement (SPA) not being signed and new services being added to the SPA as was projected.

**VARIANCE REPORT NARRATIVE  
FY 2020 AND FY 2021**

**05 03 04  
HTH 460**

**PROGRAM TITLE: CHILD & ADOLESCENT MENTAL HEALTH**

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Item #5. Same as Items #1 and #2.



# VARIANCE REPORT NARRATIVE FY 2020 AND FY 2021

05 03 05  
HTH 501

## **PROGRAM TITLE: DEVELOPMENTAL DISABILITIES**

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### **PART I - EXPENDITURES AND POSITIONS**

The variance in position counts for FY 20 was due to a freeze on recruitment per Executive Memorandum No. 20-01. The expenditure variance was due to a freeze on general funds implemented in the 4th quarter.

### **PART II - MEASURES OF EFFECTIVENESS**

No significant variances.

### **PART III - PROGRAM TARGET GROUPS**

Item 1. The variance was due to a new process to improve the timeliness of eligibility determinations. The program was able to make more determinations in a shorter time and make determinations on applications that were in queue in the process.

### **PART IV - PROGRAM ACTIVITIES**

Item 1. The variance was due to participants receiving State-funded services while they were waiting for their Medicaid application to be approved. Once the participant's Medicaid was approved, the participant was discharged from the State-funded services.

Item 9. The variance was due to fewer persons in the Hawaii State Hospital receiving dental treatment from the Developmental Disabilities Division. The number of persons receiving dental treatment depends on the Hawaii State Hospital court admitted patients.

Item 10. The variance is due to the vacancy of a dentist position and the COVID-19 pandemic. The dental clinics were open for only emergency treatment and had to postpone elective dental procedures for 2.5 months during the pandemic.

# VARIANCE REPORT

	FISCAL YEAR 2019-20				THREE MONTHS ENDED 09-30-20				NINE MONTHS ENDING 06-30-21			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
<b>PART I: EXPENDITURES &amp; POSITIONS</b>												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES (\$1,000's)												
OPERATING COSTS												
POSITIONS	45.50	41.50	- 4.00	9	39.50	37.50	- 2.00	5	39.50	39.50	+ 0.00	0
EXPENDITURES (\$1000's)	7,135	8,301	+ 1,166	16	1,536	3,833	+ 2,297	150	4,678	10,748	+ 6,070	130
TOTAL COSTS												
POSITIONS	45.50	41.50	- 4.00	9	39.50	37.50	- 2.00	5	39.50	39.50	+ 0.00	0
EXPENDITURES (\$1000's)	7,135	8,301	+ 1,166	16	1,536	3,833	+ 2,297	150	4,678	10,748	+ 6,070	130
	FISCAL YEAR 2019-20				FISCAL YEAR 2020-21							
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%				
PART II: MEASURES OF EFFECTIVENESS												
1. % PURCHASE-OF-SERVICE PROGRAMS MONITORED	100	100	+ 0	0	100	100	+ 0	0				
2. % OF GRANTS APPLIED FOR AND OBTAINED	100	80	- 20	20	100	100	+ 0	0				
PART III: PROGRAM TARGET GROUP												
1. RESIDENT POPULATION	1452000	1416000	- 36000	2	1462000	1417000	- 45000	3				
2. # PURCHASE-OF-SERVICE PROVIDERS	58	56	- 2	3	59	64	+ 5	8				
PART IV: PROGRAM ACTIVITY												
1. # PURCHASE-OF-SERVICE PROGRAMS TO BE MONITORED	58	56	- 2	3	59	64	+ 5	8				
2. # OF GRANT APPLICATIONS SUBMITTED	2	5	+ 3	150	2	3	+ 1	50				

# VARIANCE REPORT NARRATIVE FY 2020 AND FY 2021

05 03 06  
HTH 495

## **PROGRAM TITLE: BEHAVIORAL HEALTH ADMINISTRATION**

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### **PART I - EXPENDITURES AND POSITIONS**

Fiscal Year 2019-20: At the end of the fiscal year, there were 4.00 vacant positions due to a hiring freeze. The expenditure variance was attributed to expenditures from non-appropriated federal funds.

Fiscal Year 2020-21: At the end of the 1st quarter, there were 2.00 vacant positions due to a hiring freeze. The expenditure variances are attributed to expenditures from non-appropriated federal funds.

### **PART II - MEASURES OF EFFECTIVENESS**

Item 2. The variance is a result of applying for, but not obtaining, a COVID-19 related federal grant.

### **PART III - PROGRAM TARGET GROUPS**

Item 2. Fiscal Year 2020-21: The variance is attributed to an increase in the number of new providers providing COVID-19 related services.

### **PART IV - PROGRAM ACTIVITIES**

Item 1. Fiscal Year 2021-21: The variance is attributed to an increase in the number of new providers providing COVID-19 related services.

Item 2. Fiscal Years 2019-20 and 2020-21: The variances are attributed to applications that have been and will be submitted for COVID-19 related grants.

# VARIANCE REPORT

	FISCAL YEAR 2019-20				THREE MONTHS ENDED 09-30-20				NINE MONTHS ENDING 06-30-21			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
<b>PART I: EXPENDITURES &amp; POSITIONS</b>												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES (\$1,000's)												
OPERATING COSTS												
POSITIONS	285.00	256.00	- 29.00	10	276.80	252.80	- 24.00	9	276.80	275.00	- 1.80	1
EXPENDITURES (\$1000's)	35,964	28,626	- 7,338	20	8,381	7,584	- 797	10	21,333	21,405	+ 72	0
TOTAL COSTS												
POSITIONS	285.00	256.00	- 29.00	10	276.80	252.80	- 24.00	9	276.80	275.00	- 1.80	1
EXPENDITURES (\$1000's)	35,964	28,626	- 7,338	20	8,381	7,584	- 797	10	21,333	21,405	+ 72	0
	FISCAL YEAR 2019-20				FISCAL YEAR 2020-21							
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%				
PART II: MEASURES OF EFFECTIVENESS												
1. % FOOD SERVICE ESTABLISHMENTS THAT MEET STANDARDS	83	91	+ 8	10	83	90	+ 7	8				
2. % OF REQUESTS FOR SERVICES MET (STATE LAB SVCS)	99	100	+ 1	1	99	100	+ 1	1				

# VARIANCE REPORT NARRATIVE FY 2020 AND FY 2021

**PROGRAM TITLE: ENVIRONMENTAL HEALTH**

**05 04**

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## **PART I - EXPENDITURES AND POSITIONS**

Specific variances are discussed in detail in the lowest level program narratives.

## **PART II - MEASURES OF EFFECTIVENESS**

Item 1. The planned data was input incorrectly, should be 85.

Item 2. The planned data was input incorrectly, should be 100.

VARIANCE REPORT

	FISCAL YEAR 2019-20				THREE MONTHS ENDED 09-30-20				NINE MONTHS ENDING 06-30-21			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
<b>PART I: EXPENDITURES &amp; POSITIONS</b>												
<b>RESEARCH &amp; DEVELOPMENT COSTS</b>												
<b>POSITIONS</b>												
<b>EXPENDITURES (\$1,000's)</b>												
<b>OPERATING COSTS</b>												
<b>POSITIONS</b>	166.00	141.00	- 25.00	15	161.00	140.00	- 21.00	13	161.00	161.00	+ 0.00	0
<b>EXPENDITURES (\$1000's)</b>	12,912	11,442	- 1,470	11	2,878	2,646	- 232	8	9,369	9,601	+ 232	2
<b>TOTAL COSTS</b>												
<b>POSITIONS</b>	166.00	141.00	- 25.00	15	161.00	140.00	- 21.00	13	161.00	161.00	+ 0.00	0
<b>EXPENDITURES (\$1000's)</b>	12,912	11,442	- 1,470	11	2,878	2,646	- 232	8	9,369	9,601	+ 232	2

	FISCAL YEAR 2019-20				FISCAL YEAR 2020-21			
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%
<b>PART II: MEASURES OF EFFECTIVENESS</b>								
1. % OF SCHOOLS IN COMPLIANCE WITH AHERA (IRH)	95	83	- 12	13	95	85	- 10	11
2. % FOOD ESTABLISHMENTS RECEIVING "PASS" PLACARD	85	91	+ 6	7	85	90	+ 5	6
3. % FOOD ESTABMTS RCVG "CONDITIONAL PASS" PLACARD	15	9	- 6	40	15	10	- 5	33
4. % FOOD ESTABLISHMENTS RECEIVING "CLOSED" PLACARD	1	1	+ 0	0	1	1	+ 0	0
5. % FARMS W/ VIOLATIVE PESTICIDE RESIDUES	5	14	+ 9	180	5	10	+ 5	100
6. % FOOD ESTABMTS W/RISK FACTORS FOODBORNE ILLNESS	15	9	- 6	40	15	10	- 5	33
7. % AIR-CONDITIOND/VENTILATD FACILITIES IN COMPLIANC	70	83	+ 13	19	70	80	+ 10	14
8. % NOISE PERMITS IN COMPLIANCE (IRH)	98	99	+ 1	1	98	99	+ 1	1
9. % RADIATION FACILITIES IN COMPLIANCE (IRH)	70	64	- 6	9	70	70	+ 0	0
10. % ASBESTOS RENOV/DEMO (NESHAP) PROJS IN COMPLIANCE	90	89	- 1	1	90	90	+ 0	0

<b>PART III: PROGRAM TARGET GROUP</b>								
1. # SCHLS REQUIRED TO IMPLMT ASBESTOS MGT PLAN (IRH)	440	431	- 9	2	440	431	- 9	2
2. # FOOD ESTABLISHMENTS	10900	10855	- 45	0	11100	10900	- 200	2
3. POPULATION OF HAWAII	1490000	1317000	- 173000	12	1500000	1300000	- 200000	13
4. # TEMPORARY FOOD ESTABLISHMENT PERMITTEES	6250	4586	- 1664	27	6300	4500	- 1800	29
5. # FARMS WITH VIOLATIVE PESTICIDE RESIDUES	5	10	+ 5	100	5	5	+ 0	0
6. # LICENSED RADIOLOGIC TECHNOLOGISTS (IRH)	1500	1601	+ 101	7	1500	1500	+ 0	0
7. # TATTOO SHOPS	265	278	+ 13	5	265	275	+ 10	4
8. # SITES WITH A NOISE PERMIT	450	437	- 13	3	450	450	+ 0	0
9. # OF RADIATION FACILITIES (IRH)	1120	1108	- 12	1	1120	1120	+ 0	0
10. # ASBESTOS RENOVATN/DEMOLITN (NESHAP) PROJS (IRH)	700	611	- 89	13	700	700	+ 0	0

<b>PART IV: PROGRAM ACTIVITY</b>								
1. # INSPECTIONS OF AHERA SOURCES (IRH)	90	110	+ 20	22	90	100	+ 10	11
2. # ROUTINE INSPECTIONS OF FOOD ESTABLISHMENTS	8000	3614	- 4386	55	10000	3800	- 6200	62
3. # FOOD SAFETY INSPECTIONS W/ 2/MORE MAJOR VIOLATNS	1000	325	- 675	68	1000	325	- 675	68
4. # AS-BUILT AC/VENTILATION INSPECTIONS (IRH)	75	48	- 27	36	75	50	- 25	33
5. # FOOD PRODUCTS SAMPLED FOR PESTICIDE RESIDUE	400	186	- 214	54	400	240	- 160	40
6. # FOODBORNE ILLNESS INVESTIGATIONS CONDUCTED	150	13	- 137	91	150	50	- 100	67
7. # RADIOLOGIC TECHS AUDITD FOR LICENSURE COMPLIANCE	750	832	+ 82	11	750	800	+ 50	7
8. # NOISE PERMIT INSPECTIONS (IRH)	700	1083	+ 383	55	700	1000	+ 300	43
9. # INSPECTIONS OF RADIATION FACILITIES (IRH)	225	209	- 16	7	225	225	+ 0	0
10. # FOOD SAFETY CLASSES CONDUCTED	150	252	+ 102	68	150	250	+ 100	67

# VARIANCE REPORT NARRATIVE FY 2020 AND FY 2021

05 04 01  
HTH 610

## **PROGRAM TITLE: ENVIRONMENTAL HEALTH SERVICES**

### **PART I - EXPENDITURES AND POSITIONS**

The variances in the number of positions filled for FY 20 and for the first three months of FY 21 were primarily due to the lengthy recruitment process and difficulty in filling positions as well as the lengthy reorganization process that must be completed prior to establishing or varying positions. This was compounded by the hiring freeze that was implemented in FY 20. A major reorganization of the Sanitation Branch (now Food Safety Branch) was completed in FY 20, but the seven new positions are still in the classification and establishment process.

For expenditures, the variance for FY 20 was due to salary savings and the restriction that was imposed. The variances for FY 21 are due to the restriction that was imposed on all non-federal funds in Q1 as well as salary savings from the continuing hiring freeze.

### **PART II - MEASURES OF EFFECTIVENESS**

Item 1. The schools in compliance with the Asbestos Hazard Emergency Response Act (AHERA) includes AHERA inspections conducted on training providers and certified individuals. Additional focus on ensuring asbestos worker certification compliance during abatement projects in FY 20 led to a decrease in the compliance rate. A similar or increased compliance rate is expected for FY 21.

Item 3. The variances for both years is due to continued, steady improvement in reducing foodborne illness risk factors. The program continues to focus on reducing these risk factors.

Item 5. The increase was due to the Food and Drug Branch's (FDB) reestablishment as a standalone program and the resumption of the Oahu pesticide monitoring program.

Item 6. The variance was in line with continued, steady improvement in reducing foodborne illness risk factors. The variance for FY 21 should continue to reflect the improvement.

Item 7. Continued outreach efforts with the regulated community contributed to an increase in the compliance rate for FY 20. A similar compliance rate is expected for FY 21.

### **PART III - PROGRAM TARGET GROUPS**

Item 3. The variance was due to an apparent outmigration of the population due to economic hardships. The planned variance reflects a continuation of this trend.

Item 4. The variance was caused by the pandemic, which prevented issuance of Temporary Food Sale (Special Event) permits for 33% of FY 20. The FY 21 variance reflects a continuation of restrictions on these temporary food sales.

Item 5. The increase was due to FDB's reestablishment as a standalone program and the resumption of the Oahu pesticide monitoring program.

Item 10. The variance was due to a decrease in construction projects and commercial development, possibly due to COVID-19 effects.

### **PART IV - PROGRAM ACTIVITIES**

Item 1. Continued additional focus on ensuring asbestos worker certification compliance during abatement projects in FY 20 resulted in the increase in AHERA inspections. This number is expected to return to pre-FY 18 levels going forward (90 inspections).

Item 2. The variance was due to a 23% reduction of Food Safety Specialist staff on Oahu due to reorganization coupled with the effects of the pandemic. The program was unable to conduct routine inspections for 33% of FY 20 due to the pandemic. The variance for FY 21 is unpredictable given the nature of the current pandemic.

Item 3. The large variance was due to the significant reduction (55%) of routine inspections conducted in FY 20 due to the pandemic. FY 21 may be similar.

## VARIANCE REPORT NARRATIVE FY 2020 AND FY 2021

05 04 01  
HTH 610

### PROGRAM TITLE: ENVIRONMENTAL HEALTH SERVICES

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Item 4. The number of as-built inspections for FY 20 was hindered by the stay-at-home, work-from-home orders that precluded these inspections in the 4th quarter of FY 20. Investigations were limited to complaint responses. The number of inspections for FY 21 is expected to be like FY 20.

Item 5. From 2012 to 2019, FDB was administratively assigned to the Food Safety Branch, where the pesticide monitoring program was administered statewide. Samples of local fruits and vegetables were collected from Oahu, Maui, Kauai, and Hawaii Island. The decrease was due to FDB's reestablishment as a standalone program and the resumption of the pesticide monitoring program for Oahu only. Produce sampling on the neighbor islands will be considered as the program develops a statewide strategic plan.

Item 6. The variance was due to a significant reduction in the number of foodborne illness cases being reported to the Disease Investigation Branch. As the public has become keenly focused on hand washing and COVID-19, this may have reduced the number of foodborne illnesses significantly, as most of these illnesses are spread due to lack of proper handwashing. The FY 21 variance is a best guess and assumes a return to historic numbers.

Item 7. The increase in FY 20 was due to an increase in the number of new and renewal radiologic technologist license applications. All applications received are audited for compliance.

Item 8. The increase in FY 20 was due to having a fully trained, seasoned staff performing normal activities despite the stay-at-home, work-from-home order. The number of inspections for FY 21 is expected to be like FY 20.

Item 10. The large variance was due to changes made in 2018 for the planned numbers. Since 2018, the number of classes held increased dramatically from about 150 in FY 17 to 447 in FY 18 and then to 462 in FY 19 due to the legally mandatory requirement for the industry to obtain

food safety education that began in FY 18 and changes in registration from manual scheduling to using online class scheduling. There was a large decrease in the number of classes held from 462 in FY 19 to 252 in FY 20. This was due to the COVID-19 pandemic curtailing the food safety classes in the last third of FY 20. This is expected to continue in FY 21.

PROGRAM TITLE:

STATE LABORATORY SERVICES

12/5/20

PROGRAM-ID:

HTH-710

PROGRAM STRUCTURE NO:

050402

	FISCAL YEAR 2019-20				THREE MONTHS ENDED 09-30-20				NINE MONTHS ENDING 06-30-21			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
<b>PART I: EXPENDITURES &amp; POSITIONS</b>												
<b>RESEARCH &amp; DEVELOPMENT COSTS</b>												
<b>POSITIONS</b>												
<b>EXPENDITURES (\$1,000's)</b>												
<b>OPERATING COSTS</b>												
<b>POSITIONS</b>	75.00	75.00	+ 0.00	0	73.00	73.00	+ 0.00	0	73.00	73.00	+ 0.00	0
<b>EXPENDITURES (\$1000's)</b>	14,474	9,395	- 5,079	35	2,351	2,071	- 280	12	6,879	7,159	+ 280	4
<b>TOTAL COSTS</b>												
<b>POSITIONS</b>	75.00	75.00	+ 0.00	0	73.00	73.00	+ 0.00	0	73.00	73.00	+ 0.00	0
<b>EXPENDITURES (\$1000's)</b>	14,474	9,395	- 5,079	35	2,351	2,071	- 280	12	6,879	7,159	+ 280	4
	FISCAL YEAR 2019-20				FISCAL YEAR 2020-21							
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%				
<b>PART II: MEASURES OF EFFECTIVENESS</b>												
1. % OF FALSE POSITIVE LAB TEST RESULTS	0	0	+ 0	0	0	0	+ 0	0	0	0	+ 0	0
2. % OF FALSE NEGATIVE LAB TEST RESULTS	0	0	+ 0	0	0	0	+ 0	0	0	0	+ 0	0
3. % OF REQUESTS FOR SERVICES MET	100	100	+ 0	0	100	100	+ 0	0	100	100	+ 0	0
4. % PROFICIENCY TESTS PERFRMD MEETG PROFICIENCY STDS	100	100	+ 0	0	100	100	+ 0	0	100	100	+ 0	0
<b>PART III: PROGRAM TARGET GROUP</b>												
1. OTHER DEPARTMENT OF HEALTH PROGRAMS	9	9	+ 0	0	9	9	+ 0	0	9	9	+ 0	0
2. OTHER GOVERNMENT AGENCIES	7	7	+ 0	0	7	7	+ 0	0	7	7	+ 0	0
3. # OF CLINICAL LAB PERSONNEL APPLYING FOR LICENSURE	150	140	- 10	7	150	130	- 20	13	150	130	- 20	13
4. # OF LICENSED CLINICAL LABORATORY PERSONNEL	1650	1462	- 188	11	1650	1450	- 200	12	1650	1450	- 200	12
5. # OF LABS PERFORMING CLINICAL DIAGNOSTIC TESTING	780	780	+ 0	0	780	780	+ 0	0	780	780	+ 0	0
6. # OF LABS PERFORMING SUBSTANCE ABUSE TESTING	2	2	+ 0	0	2	2	+ 0	0	2	2	+ 0	0
7. # OF LABS PERFORMING ENVIRONMENTAL TESTING	16	16	+ 0	0	16	16	+ 0	0	16	16	+ 0	0
8. # OF LABS PERFORMING MEDICAL MARIJUANA TESTING	3	4	+ 1	33	3	4	+ 1	33	3	4	+ 1	33
<b>PART IV: PROGRAM ACTIVITY</b>												
1. DRINKING WATER (WORK TIME UNITS)	275000	280835	+ 5835	2	275000	362000	+ 87000	32	275000	362000	+ 87000	32
2. WATER POLLUTION (WORK TIME UNITS)	140000	431448	+ 291448	208	140000	382000	+ 242000	173	140000	382000	+ 242000	173
3. SEXUALLY TRANSMITTED DISEASE (WORK TIME UNITS)	165000	261000	+ 96000	58	165000	272000	+ 107000	65	165000	272000	+ 107000	65
4. OTHER COMMUNICABLE DISEASES (WORK TIME UNITS)	480950	576880	+ 95930	20	480950	655000	+ 174050	36	480950	655000	+ 174050	36
5. FOOD AND DRUGS (WORK TIME UNITS)	260000	266626	+ 6626	3	260000	372300	+ 112300	43	260000	372300	+ 112300	43
6. AIR POLLUTION (WORK TIME UNITS)	889000	889000	+ 0	0	889000	889000	+ 0	0	889000	889000	+ 0	0
7. # OF LABORATORY INSPECTIONS	13	35	+ 22	169	13	36	+ 23	177	13	36	+ 23	177
8. # OF LAB PERSONNEL RECEIVING FORMAL LAB TRAINING	98	95	- 3	3	98	110	+ 12	12	98	110	+ 12	12

# VARIANCE REPORT NARRATIVE FY 2020 AND FY 2021

05 04 02  
HTH 710

## **PROGRAM TITLE: STATE LABORATORY SERVICES**

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### **PART I - EXPENDITURES AND POSITIONS**

The variance in expenditures in FY 20 was due to the portion of the Public Health Emergency Preparedness grant being transferred to HTH 710 and due to timing. The full portion of the grant was allotted in FY 20, but in FY 21, the amount was decreased to only reflect the actual estimated amount of payroll expenditures.

### **PART II - MEASURES OF EFFECTIVENESS**

No significant variances.

### **PART III - PROGRAM TARGET GROUPS**

Item 3. The decrease is due to more lab personnel retiring.

Item 4. The decrease is due to more lab personnel retiring.

Item 8. The increase is due to the addition of one lab performing marijuana testing.

### **PART IV - PROGRAM ACTIVITIES**

Item 1. FY 21: The variance in work time units for testing drinking water depends on the phase and cycle of sampling. The Environmental Protection Agency works on a three-year cycle, and the increase is cyclical.

Item 2. FYs 20-21: The increases are due to programs testing water for pollution more frequently.

Item 3. The increase is due to an increase in sexually transmitted disease testing.

Item 4. The increase is due to the increase in other communicable diseases testing.

Item 5. The increase is due to an increased demand for food and drug testing.

Item 7. FYs 20-21: Correction to the reporting of lab inspections, inspections were being completed but not reported.

Item 8. FY 21: The increase is due to additional personnel at the State Laboratories Division performing COVID-19 duties and the possible addition of a toxicology laboratory.

PROGRAM TITLE:

HEALTH CARE ASSURANCE

12/5/20

PROGRAM-ID:

HTH-720

PROGRAM STRUCTURE NO:

050403

	FISCAL YEAR 2019-20				THREE MONTHS ENDED 09-30-20				NINE MONTHS ENDING 06-30-21			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
<b>PART I: EXPENDITURES &amp; POSITIONS</b>												
<b>RESEARCH &amp; DEVELOPMENT COSTS</b>												
<b>POSITIONS</b>												
<b>EXPENDITURES (\$1,000's)</b>												
<b>OPERATING COSTS</b>												
<b>POSITIONS</b>	44.00	40.00	- 4.00	9	42.80	39.80	- 3.00	7	42.80	41.00	- 1.80	4
<b>EXPENDITURES (\$1000's)</b>	8,578	7,789	- 789	9	3,152	2,867	- 285	9	5,085	4,645	- 440	9
<b>TOTAL COSTS</b>												
<b>POSITIONS</b>	44.00	40.00	- 4.00	9	42.80	39.80	- 3.00	7	42.80	41.00	- 1.80	4
<b>EXPENDITURES (\$1000's)</b>	8,578	7,789	- 789	9	3,152	2,867	- 285	9	5,085	4,645	- 440	9
	FISCAL YEAR 2019-20				FISCAL YEAR 2020-21							
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%				
<b>PART II: MEASURES OF EFFECTIVENESS</b>												
1. % FACILITIES MTG MINIMUM LICENSURE/CERTIFICATN REQ	100	100	+ 0	0	100	100	+ 0	0	100	100	+ 0	0
2. % OF UNLICENSED SETTINGS BROUGHT INTO COMPLIANCE	100	100	+ 0	0	100	100	+ 0	0	100	100	+ 0	0
3. % COMPLAINTS INVESTGTD & CORRECTV ACTION COMPLETED	100	100	+ 0	0	100	100	+ 0	0	100	100	+ 0	0
<b>PART III: PROGRAM TARGET GROUP</b>												
1. HOSPITALS AND CRITICAL ACCESS HOSPITALS	28	29	+ 1	4	28	29	+ 1	4	28	29	+ 1	4
2. SKILL NURS(SNF), INTERM CARE FAC (ICF) AND ICF-ID	48	61	+ 13	27	48	61	+ 13	27	48	61	+ 13	27
3. ADULT RESIDENTIAL/FOSTER/COMMUNITY HOMES/DAY CARE	1790	1704	- 86	5	1790	1790	+ 0	0	1790	1790	+ 0	0
4. ESRD AND HOSPICE FACILITIES AND AGENCIES	47	45	- 2	4	47	45	- 2	4	47	45	- 2	4
5. SPCL TREATMENT FACILITIES/THERAPEUTIC LIVING PROGS	35	36	+ 1	3	35	37	+ 2	6	35	37	+ 2	6
6. CASE MGMT AGENCIES AND DIETICIANS	155	191	+ 36	23	155	225	+ 70	45	155	225	+ 70	45
7. CLINICAL LABORATORIES	782	830	+ 48	6	782	830	+ 48	6	782	830	+ 48	6
8. HOME HLTH AGENCIES/HOME CARE AGENCIES	75	86	+ 11	15	75	166	+ 91	121	75	166	+ 91	121
9. AMBULATORY SURGICAL CENTERS	23	23	+ 0	0	23	23	+ 0	0	23	23	+ 0	0
<b>PART IV: PROGRAM ACTIVITY</b>												
1. NUMBER OF STATE LICENSING SURVEYS	2060	2010	- 50	2	2060	2090	+ 30	1	2060	2090	+ 30	1
2. NUMBER OF MEDICARE CERTIFICATION SURVEYS	100	149	+ 49	49	100	100	+ 0	0	100	100	+ 0	0
3. NUMBER OF STATE COMPLAINT INVESTIGATIONS	70	262	+ 192	274	70	100	+ 30	43	70	100	+ 30	43
4. NUMBER OF FEDERAL COMPLAINT INVESTIGATIONS	100	49	- 51	51	100	75	- 25	25	100	75	- 25	25
5. NUMBER OF INVESTIGATIONS OF UNLICENSED ACTIVITIES	25	68	+ 43	172	25	60	+ 35	140	25	60	+ 35	140

# VARIANCE REPORT NARRATIVE FY 2020 AND FY 2021

05 04 03  
HTH 720

## **PROGRAM TITLE: HEALTH CARE ASSURANCE**

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### **PART I - EXPENDITURES AND POSITIONS**

The vacancies in FY 20 have resulted in smaller payroll expenditures, approximately \$475,000 of salaries and \$85,000 of fringe benefits. Also, the actual contract cost reimbursed to Community Ties of America, Inc., was \$94,916 or 6% less than the budget. In addition, some indirect costs (IDC) of the federal Medicare program incurred in FY 20 has not been recorded. The Office of Health Care Assurance (OHCA) plans to record about \$125,000 of the FY 20 IDC in December 2020 after federal Medicare expenditures in FY 20 have been reconciled and the FY 20 cumulative federal Medicare expenditure reports have been filed and submitted to the Centers for Medicare & Medicaid Services (CMS).

### **PART II - MEASURES OF EFFECTIVENESS**

No significant variances.

### **PART III - PROGRAM TARGET GROUPS**

Item 2: The Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF-IID) were inadvertently excluded in the FY 19-20 variance report. There were 17 ICF-IID facilities in FY 20.

Item 6: Licensed dietitians in FY 20 increased more than expected. In addition, the OHCA anticipates an increase of the Case Management Agency in FY 21.

Item 8: The number of Home Care Agency (HCA) increased in FY 20 due to the implementation of the HCA licensure program. OHCA anticipates continued increases in HCA licensing as more license applications are submitted in FY 21.

### **PART IV - PROGRAM ACTIVITIES**

Item 2: The number of federal Medicare certification surveys increased in FY 20 due to additional COVID-19 surveys that were required by CMS.

Item 3: Complaints are difficult to plan for. OHCA had received more complaints than anticipated, likely due to heightened public expectations and media attention.

Item 4: Complaints are difficult to plan for. OHCA conducted less complaint investigations of Medicare-eligible health care facilities in FY 20. OHCA estimates to conduct 75 compliant investigations in FY 21.

Item 5: OHCA conducted more investigations of unlicensed activities in FY 20 due to the increase in complaints from the public on possible illegal care home operations. The complaints have continued to increase, so the number of investigations of unlicensed activities will continue to increase in FY 21. OHCA contracted with the Department of the Attorney General's Investigations Office to conduct complaint investigations on behalf of the Department of Health's OHCA due to the increased workload.

# VARIANCE REPORT

	FISCAL YEAR 2019-20				THREE MONTHS ENDED 09-30-20				NINE MONTHS ENDING 06-30-21			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
<b>PART I: EXPENDITURES &amp; POSITIONS</b>												
<b>RESEARCH &amp; DEVELOPMENT COSTS</b>												
<b>POSITIONS</b>												
<b>EXPENDITURES (\$1,000's)</b>												
<b>OPERATING COSTS</b>												
<b>POSITIONS</b>	190.00	165.00	- 25.00	13	190.00	162.50	- 27.50	14	190.00	184.00	- 6.00	3
<b>EXPENDITURES (\$1000's)</b>	39,716	18,295	- 21,421	54	4,974	4,395	- 579	12	14,457	15,036	+ 579	4
<b>TOTAL COSTS</b>												
<b>POSITIONS</b>	190.00	165.00	- 25.00	13	190.00	162.50	- 27.50	14	190.00	184.00	- 6.00	3
<b>EXPENDITURES (\$1000's)</b>	39,716	18,295	- 21,421	54	4,974	4,395	- 579	12	14,457	15,036	+ 579	4
	FISCAL YEAR 2019-20				FISCAL YEAR 2020-21							
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%				
<b>PART II: MEASURES OF EFFECTIVENESS</b>												
1. % CERTIF OF NEED APPLIC DOCUMTNG RELATION TO HSFP	95	95	+ 0	0	95	95	+ 0	0				
2. % OF STRATEGIES COMPLETED IN HAWAII STATE DD PLAN	90	95	+ 5	6	90	95	+ 5	6				

# VARIANCE REPORT NARRATIVE FY 2020 AND FY 2021

**PROGRAM TITLE: OVERALL PROGRAM SUPPORT**

**05 05**

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## **PART I - EXPENDITURES AND POSITIONS**

Specific variances are discussed in detail in the lowest level program narratives.

## **PART II - MEASURES OF EFFECTIVENESS**

Item 2. The planned data was input incorrectly, should be 95.

PROGRAM TITLE:

STATE HEALTH PLANNING & DEVELOPMENT AGENCY

12/5/20

PROGRAM-ID:

HTH-906

PROGRAM STRUCTURE NO:

050501

	FISCAL YEAR 2019-20				THREE MONTHS ENDED 09-30-20				NINE MONTHS ENDING 06-30-21			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
<b>PART I: EXPENDITURES &amp; POSITIONS</b>												
<b>RESEARCH &amp; DEVELOPMENT COSTS</b>												
<b>POSITIONS</b>												
<b>EXPENDITURES (\$1,000's)</b>												
<b>OPERATING COSTS</b>												
<b>POSITIONS</b>	6.00	5.00	- 1.00	17	6.00	4.00	- 2.00	33	6.00	6.00	+ 0.00	0
<b>EXPENDITURES (\$1000's)</b>	705	426	- 279	40	147	80	- 67	46	443	510	+ 67	15
<b>TOTAL COSTS</b>												
<b>POSITIONS</b>	6.00	5.00	- 1.00	17	6.00	4.00	- 2.00	33	6.00	6.00	+ 0.00	0
<b>EXPENDITURES (\$1000's)</b>	705	426	- 279	40	147	80	- 67	46	443	510	+ 67	15

	FISCAL YEAR 2019-20				FISCAL YEAR 2020-21			
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%
<b>PART II: MEASURES OF EFFECTIVENESS</b>								
1. % CERTIF OF NEED APPL DOCUMTNG RELATIN TO HSFP	95	95	+ 0	0	95	95	+ 0	0
2. % OF CON APPL APPRVD BASED ON FINDGS REL TO HSFP	85	90	+ 5	6	85	85	+ 0	0
3. % SHCC MTG TIME SPENT ON REVWNG/RECOM ON CON APPL	25	25	+ 0	0	25	25	+ 0	0
4. % SHCC MEETG TIME SPENT ON REVWNG/REVSG/APPRV HSFP	30	25	- 5	17	30	25	- 5	17
5. % SAC MTG TIME SPENT ON REVWNG/RECOM ON CON APPL	35	30	- 5	14	35	30	- 5	14
6. % SAC MEETG TIME SPENT ON REVWNG/REVSG/APPRV HSFP	35	30	- 5	14	35	35	+ 0	0
7. PERCENT OF PREVIOUS YEAR'S CON APPROVALS MONITORED	100	100	+ 0	0	100	100	+ 0	0
8. % HTH CARE FAC SUBM SEMI-ANN REPTS W/IN SPCFD TIME	95	87	- 8	8	95	95	+ 0	0
9. % USRS RATG SEMI-ANN REPTS AS HELPFUL/VERY HELPFUL	90	85	- 5	6	90	90	+ 0	0
10. NUMBER OF SPECIAL REPORTS PUBLISHED	2	2	+ 0	0	2	2	+ 0	0

<b>PART III: PROGRAM TARGET GROUP</b>								
1. ALL THE PEOPLE OF THE STATE OF HAWAII	1275	1420	+ 145	11	1275	1420	+ 145	11
2. VOLUNTEERS INVOLVED IN SHCC/SUB-AREA COUNCILS	140	130	- 10	7	140	130	- 10	7
3. PUBLIC AND PRIVATE HEALTH CARE SERVICE PROVIDERS	85	85	+ 0	0	85	85	+ 0	0
4. HEALTH CARE RESEARCHERS, DEVELOPERS AND ANALYSTS	35	35	+ 0	0	35	35	+ 0	0
5. HEALTH CARE FOCUSED ASSOCIATIONS	12	12	+ 0	0	12	12	+ 0	0

<b>PART IV: PROGRAM ACTIVITY</b>								
1. PLNNG, RESEARCH & REVIEW ACTIV (PROF PERSON DAYS)	790	760	- 30	4	790	760	- 30	4
2. DATA MANAGEMENT ACTIVITIES (PROF PERSON DAYS)	212	206	- 6	3	212	206	- 6	3
3. HSHCC & SAC SUPPORT & TRAINING (PROF PERSON DAYS)	225	220	- 5	2	225	220	- 5	2

# VARIANCE REPORT NARRATIVE FY 2020 AND FY 2021

05 05 01  
HTH 906

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**PROGRAM TITLE: STATE HEALTH PLANNING & DEVELOPMENT AGENCY**

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**PART I - EXPENDITURES AND POSITIONS**

The variances for positions and expenditures in FY 20 were due to the vacant Administrator position.

The variances for the positions and expenditures in the three months that ended September 30, 2020, were due to: fewer inter-island travel due to the pandemic; fewer meetings of the Subarea Health Planning Councils and Statewide Health Coordinating Council (SHCC); the two vacant health coordinator positions; and funding for the Administrator position.

**PART II - MEASURES OF EFFECTIVENESS**

Item 4. The variances of 17% in FY 20 and FY 21 are due to a decrease in the proportion of time spent on Health Services and Facilities Plan (HSFP) deliberations due to a lesser number of SHCC meetings and more time spent on Certificate of Need (CON) applications.

Item 5. The variances of 14% in FY 20 and FY 21 are due to a decrease in the number of standard CON applications and fewer Subarea Health Planning Council meetings.

Item 6. The variance of 14% in FY 20 was due to fewer Subarea Health Planning Council meetings and less time in reviewing HSFP.

**PART III - PROGRAM TARGET GROUPS**

Item 1. The variances of 11% in FY 20 and FY 21 are due to an increase in Hawaii's population based on U.S. Census data.

**PART IV - PROGRAM ACTIVITIES**

No significant variances.

PROGRAM TITLE:

HEALTH STATUS MONITORING

12/5/20

PROGRAM-ID:

HTH-760

PROGRAM STRUCTURE NO:

050502

	FISCAL YEAR 2019-20				THREE MONTHS ENDED 09-30-20				NINE MONTHS ENDING 06-30-21			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
<b>PART I: EXPENDITURES &amp; POSITIONS</b>												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES (\$1,000's)												
OPERATING COSTS												
POSITIONS	37.50	32.00	- 5.50	15	37.50	29.00	- 8.50	23	37.50	32.50	- 5.00	13
EXPENDITURES (\$1000's)	2,812	2,447	- 365	13	635	460	- 175	28	1,604	1,779	+ 175	11
TOTAL COSTS												
POSITIONS	37.50	32.00	- 5.50	15	37.50	29.00	- 8.50	23	37.50	32.50	- 5.00	13
EXPENDITURES (\$1000's)	2,812	2,447	- 365	13	635	460	- 175	28	1,604	1,779	+ 175	11
	FISCAL YEAR 2019-20				FISCAL YEAR 2020-21							
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%				
PART II: MEASURES OF EFFECTIVENESS												
1. % VITAL RECORDS ISSUED WITHIN 10 DAYS FROM REQUEST	75	43	- 32	43	75	50	- 25	33				
2. % TARGETED RESEARCH OR STATISTICS REPORTS DISSEM	80	80	+ 0	0	80	80	+ 0	0				
3. MORTALITY RATE (PER THOUSAND)	8	7.9	- 0.1	1	8	8.2	+ 0.2	2				
4. AVERAGE LIFE SPAN OF RESIDENTS	82.4	82.4	+ 0	0	82.4	82.4	+ 0	0				
PART III: PROGRAM TARGET GROUP												
1. DEPARTMENT OF HEALTH PROGRAMS	87	87	+ 0	0	87	87	+ 0	0				
2. HAWAIIANS AND OTHER ETHNIC GROUPS	1450000	1420000	- 30000	2	1470000	1420000	- 50000	3				
3. VITAL EVENT REGISTRANTS	74000	71400	- 2600	4	74000	71400	- 2600	4				
4. ADULT POPULATION 18 AND OVER	1140000	1120000	- 20000	2	1150000	1120000	- 30000	3				
PART IV: PROGRAM ACTIVITY												
1. # OF MAJOR HEALTH STATISTICS REQUESTS FULFILLED	85	85	+ 0	0	85	85	+ 0	0				
2. # OF VITAL EVENTS REGISTERED	53000	52400	- 600	1	53000	52000	- 1000	2				
3. # OF VITAL RECORD CERTIFICATES ISSUED	280000	290828	+ 10828	4	280000	300000	+ 20000	7				
4. # NEW DATA SETS/STAT ITEMS DISSEM ELECTRONICALLY	6	6	+ 0	0	6	6	+ 0	0				

# VARIANCE REPORT NARRATIVE FY 2020 AND FY 2021

05 05 02  
HTH 760

## **PROGRAM TITLE: HEALTH STATUS MONITORING**

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### **PART I - EXPENDITURES AND POSITIONS**

In FY 20, the variance in position count was primarily due to recent vacancies.

In FY 21, the variance in position count is primarily due to recent vacancies.

In FY 20 and FY 21, the variances in expenditures are primarily attributed to delays in procurement and position vacancies. Also, due to State budget cuts from Act 9, SLH 2020, five positions within the program became unfunded.

### **PART II - MEASURES OF EFFECTIVENESS**

Item 1. The variance was due to staff shortages and the increase in certificates issued.

### **PART III - PROGRAM TARGET GROUPS**

No significant variances.

### **PART IV - PROGRAM ACTIVITIES**

Item 3. The variance was due to increased security procedures at the Department of Motor Vehicles and airports.

PROGRAM TITLE:

DEVELOPMENTAL DISABILITIES COUNCIL

12/5/20

PROGRAM-ID:

HTH-905

PROGRAM STRUCTURE NO:

050503

	FISCAL YEAR 2019-20				THREE MONTHS ENDED 09-30-20				NINE MONTHS ENDING 06-30-21			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
<b>PART I: EXPENDITURES &amp; POSITIONS</b>												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES (\$1,000's)												
OPERATING COSTS												
POSITIONS	7.50	7.50	+ 0.00	0	7.50	7.50	+ 0.00	0	7.50	7.50	+ 0.00	0
EXPENDITURES (\$1000's)	752	752	+ 0	0	241	241	+ 0	0	511	511	+ 0	0
TOTAL COSTS												
POSITIONS	7.50	7.50	+ 0.00	0	7.50	7.50	+ 0.00	0	7.50	7.50	+ 0.00	0
EXPENDITURES (\$1000's)	752	752	+ 0	0	241	241	+ 0	0	511	511	+ 0	0
	FISCAL YEAR 2019-20				FISCAL YEAR 2020-21							
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%				
PART II: MEASURES OF EFFECTIVENESS												
1. % ACTIV COMPLTD W/IN ESTAB TMEFRM HI STATE DD PLAN	95	95	+ 0	0	95	95	+ 0	0				
2. % CONSUMER SATISFACTION SURVEYS W/SATISFACTION	90	95	+ 5	6	90	90	+ 0	0				
PART III: PROGRAM TARGET GROUP												
1. ESTIMATE OF PREVALENCE OF INDIVIDUALS W/DEV. DIS.	22555	22619	+ 64	0	22555	22619	+ 64	0				
2. FAMILIES OF INDIVIDUALS WITH DEV. DISABILITIES	22555	22619	+ 64	0	22555	22619	+ 64	0				
3. DEVELOPMENTAL DISABILITIES SERVICE PROVIDERS	70	70	+ 0	0	70	70	+ 0	0				
PART IV: PROGRAM ACTIVITY												
1. # PUB. AWARENESS/ED/TRNG ACT COORD/CONDTD/CO-SPNRD	25	140	+ 115	460	25	140	+ 115	460				
2. # INDIVIDUALS W/DD & FAMILY MEMBERS PARTICIPATING	5000	5000	+ 0	0	5000	5000	+ 0	0				
3. # OF SYSTEMS CHANGE ACTIVITIES	20	200	+ 180	900	20	300	+ 280	1400				
4. # LEG MEASURES MONITORED, TRACKED, &PRVD TESTIMONY	20	79	+ 59	295	20	35	+ 15	75				
5. # COUNTY, FED, STATE POLICIES PROVD COMMENT/RMMNS	5	3	- 2	40	5	5	+ 0	0				
6. # OF CMMNTY ADVISORY GRPS, COALITIONS, ETC PARTICD	100	100	+ 0	0	100	100	+ 0	0				
7. # INDIVIDUALS W/DD PRTCNG IN SELF-ADVCY ACTIVITIES	1000	3256	+ 2256	226	1000	3500	+ 2500	250				

# VARIANCE REPORT NARRATIVE FY 2020 AND FY 2021

05 05 03  
HTH 905

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**PROGRAM TITLE: DEVELOPMENTAL DISABILITIES COUNCIL**

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**PART I - EXPENDITURES AND POSITIONS**

Expenditures: No significant variances.

Positions: No significant variances. All positions are currently filled.

Item 7. The variance was due to an increase in self-advocacy trainings and the number of individuals with DD who participated in the trainings (Feeling Safe Being Safe, mentoring, healthy living, etc.).

**PART II - MEASURES OF EFFECTIVENESS**

No significant variances.

**PART III - PROGRAM TARGET GROUPS**

No significant variances.

**PART IV - PROGRAM ACTIVITIES**

Item 1. The variance was due to an increase in the Council staff's involvement with activities, presentations, and training regarding self-advocacy, self-determination, Feeling Safe Being Safe, transition from high school, and individuals/family members participating in the neighbor island Developmental Disabilities (DD) Committees and Self-Advocacy Advisory Council.

Item 2. No significant variances.

Item 3. The variance was due to the change in how the data for systems change activities are being collected.

Item 4. The variance is due to an increase in DD-related legislative measures (including COVID-19 measures) that were introduced in FY 20 and will be introduced in FY 21.

Item 5. The variance was due to the Council not providing direct comments and recommendations to national policies. They were provided through the Council's national organization.

Item 6. No significant variances.

PROGRAM TITLE: GENERAL ADMINISTRATION

PROGRAM-ID: HTH-907

PROGRAM STRUCTURE NO: 050504

	FISCAL YEAR 2019-20				THREE MONTHS ENDED 09-30-20				NINE MONTHS ENDING 06-30-21			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
<b>PART I: EXPENDITURES &amp; POSITIONS</b>												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES (\$1,000's)												
<b>OPERATING COSTS</b>												
POSITIONS	134.00	115.50	- 18.50	14	134.00	118.00	- 16.00	12	134.00	134.00	+ 0.00	0
EXPENDITURES (\$1000's)	34,978	14,355	- 20,623	59	3,845	3,515	- 330	9	11,536	11,866	+ 330	3
<b>TOTAL COSTS</b>												
POSITIONS	134.00	115.50	- 18.50	14	134.00	118.00	- 16.00	12	134.00	134.00	+ 0.00	0
EXPENDITURES (\$1000's)	34,978	14,355	- 20,623	59	3,845	3,515	- 330	9	11,536	11,866	+ 330	3
	FISCAL YEAR 2019-20				FISCAL YEAR 2020-21							
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%				
<b>PART II: MEASURES OF EFFECTIVENESS</b>												
1. % ADMIN COSTS IN RELATION TO TOTAL DEPT COST	1	1	+ 0	0	1	1	+ 0	0	1	1	+ 0	0
2. # ADMIN BILLS ENACTED	10	10	+ 0	0	10	10	+ 0	0	10	10	+ 0	0
3. % OF KEY COMM STAKHLDRS ENGAGE IN PHP OR ER ACT	62	62	+ 0	0	62	62	+ 0	0	62	62	+ 0	0
<b>PART III: PROGRAM TARGET GROUP</b>												
1. STATEWIDE POPULATION (THOUSANDS)	1577	1416	- 161	10	1577	1416	- 161	10	1577	1416	- 161	10
2. # OF PROGRAMS & ATTACHED AGENCIES	25	25	+ 0	0	25	25	+ 0	0	25	25	+ 0	0
3. # AUTHORIZED POSITIONS (PERM & TEMP)	3260	2747	- 513	16	3260	2747	- 513	16	3260	2747	- 513	16
4. # OF KEY COMMUN STAKEHLDRS FOR PHP AND EMERG RESPO	65	65	+ 0	0	65	65	+ 0	0	65	65	+ 0	0
<b>PART IV: PROGRAM ACTIVITY</b>												
1. # LEG PROPOSALS TRACKED FOR INFO OR TESTIMONY	1200	1200	+ 0	0	1200	1200	+ 0	0	1200	1200	+ 0	0
2. # ADMIN BILLS INTRODUCED TO BOTH HOUSE & SENATE	25	25	+ 0	0	25	25	+ 0	0	25	25	+ 0	0
3. # KEY COMMUN STAKHLDRS ENGAG 1+ PHP OR ER ACTIVI	40	40	+ 0	0	40	40	+ 0	0	40	40	+ 0	0

# VARIANCE REPORT NARRATIVE FY 2020 AND FY 2021

05 05 04  
HTH 907

## **PROGRAM TITLE: GENERAL ADMINISTRATION**

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### **PART I - EXPENDITURES AND POSITIONS**

Fiscal Year 2019-20: The expenditure variance was due to the incorporation of the Office of Public Health Preparedness into HTH 907 as well as the inclusion of the ceiling for a new five-year grant.

Fiscal Year 2019-20: At the end of the fiscal year, there were 18.50 vacant positions due to a hiring freeze.

Fiscal Year 2020-21: At the end of the 1st quarter, there were 16.00 vacant positions due to a hiring freeze.

### **PART II - MEASURES OF EFFECTIVENESS**

No significant variances.

### **PART III - PROGRAM TARGET GROUPS**

Item 1. Data is provided by the U.S. Census Bureau.

Item 3. The variance is due to the reduction of positions by Act 9, SLH 2019.

### **PART IV - PROGRAM ACTIVITIES**

No significant variances.

	FISCAL YEAR 2019-20				THREE MONTHS ENDED 09-30-20				NINE MONTHS ENDING 06-30-21			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
<b>PART I: EXPENDITURES &amp; POSITIONS</b>												
<b>RESEARCH &amp; DEVELOPMENT COSTS</b>												
<b>POSITIONS</b>												
<b>EXPENDITURES (\$1,000's)</b>												
<b>OPERATING COSTS</b>												
<b>POSITIONS</b>	5.00	5.00	+ 0.00	0	5.00	4.00	- 1.00	20	5.00	4.00	- 1.00	20
<b>EXPENDITURES (\$1000's)</b>	469	315	- 154	33	106	99	- 7	7	363	370	+ 7	2
<b>TOTAL COSTS</b>												
<b>POSITIONS</b>	5.00	5.00	+ 0.00	0	5.00	4.00	- 1.00	20	5.00	4.00	- 1.00	20
<b>EXPENDITURES (\$1000's)</b>	469	315	- 154	33	106	99	- 7	7	363	370	+ 7	2
	FISCAL YEAR 2019-20				FISCAL YEAR 2020-21							
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%				
<b>PART II: MEASURES OF EFFECTIVENESS</b>												
1. % STATE AGENCIES SUBMITG REVISED LANG ACCESS PLANS	95	68	- 27	28	95	95	+ 0	0				
2. # STATE AGENCIES SUBMITTING SEMI-ANNUAL REPORTS	25	10	- 15	60	25	25	+ 0	0				
3. # STATE/COVERED ENTITIES PROVIDED TECH ASSISTANCE	30	32	+ 2	7	30	30	+ 0	0				
4. # OF INTERAGENCY/COMMUNITY MEETINGS CONDUCTED	12	11	- 1	8	12	12	+ 0	0				
5. # OF TRAININGS CONDUCTED/SPONSORED/ORGANIZED	12	14	+ 2	17	12	12	+ 0	0				
6. # OF STATE AGENCIES MONITORED/REVIEWED	25	17	- 8	32	25	25	+ 0	0				
7. # OF COMPLAINTS INVESTIGATED/RESOLVED	5	0	- 5	100	5	5	+ 0	0				
8. # OF OUTREACH ACTIVITIES	10	10	+ 0	0	10	10	+ 0	0				
<b>PART III: PROGRAM TARGET GROUP</b>												
1. STATE AGENCIES + STATE-FUNDED ENTITIES	30	32	+ 2	7	30	30	+ 0	0				
2. LIMITED ENGLISH PROFICIENCY PERSONS & COMMUNITIES	1000	1066	+ 66	7	1500	1500	+ 0	0				
<b>PART IV: PROGRAM ACTIVITY</b>												
1. # ST AGENCIES PROVIDED OVERSIGHT/CENTRAL COORDTN	25	17	- 8	32	25	25	+ 0	0				
2. # TECH ASSISTANCE PROVIDED TO ST AGEN/COV ENTITIES	30	32	+ 2	7	30	30	+ 0	0				
3. # ST AGENC MONITORD/REVIEWD FOR COMPLIAN W/LA LAWS	25	17	- 8	32	25	25	+ 0	0				
4. # PUBLIC COMPLAINTS INV/RESLVD BY INFORMAL METHODS	5	0	- 5	100	5	5	+ 0	0				
5. # OF OUTREACH, EDUCATION AND TRAINING CONDUCTED	22	24	+ 2	9	22	22	+ 0	0				

# VARIANCE REPORT NARRATIVE FY 2020 AND FY 2021

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HTH 908

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## **PROGRAM TITLE: OFFICE OF LANGUAGE ACCESS**

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### **PART I - EXPENDITURES AND POSITIONS**

FY 20: The expenditure variance was attributed to salary savings and the cancellation of planned activities due to the COVID-19 pandemic.

FY 21: The position variance is primarily due to a recent vacancy in September 2020 as well as the relatively small full-time equivalent positions that one vacancy will put it into a high percentage variance.

### **PART II - MEASURES OF EFFECTIVENESS**

Items 1 and 2. The variances were due to State agencies not submitting their revised language access plans and semi-annual reports as well as the relatively small planned numbers.

Note - This is a self-report measure. Besides urging State agencies to submit their plans and reports, the Office of Language Access (OLA) has no legal authority to compel them to submit their reports.

Item 5. The positive variance was due to a greater awareness of language access issues and increased demand for services from the community.

Item 6. The variance was due to a lack of sufficient staff to coordinate and implement program activities.

Item 7. While OLA receives many inquiries, it is difficult for OLA to predict the number of official complaints that may be filed with the office.

### **PART III - PROGRAM TARGET GROUPS**

No significant variances.

### **PART IV - PROGRAM ACTIVITIES**

Items 1 and 3. The variances were due to a lack of sufficient staff to coordinate and implement program activities and due to the increased use of online searching tools by State agencies/covered entities.

Currently, much of the information and resources offered by OLA is now available online for direct access.

Item 4. While OLA receives many inquiries, it is difficult for OLA to predict the number of official complaints that may be filed with the office.