ARIZONA DEPARTMENT OF HEALTH SERVICES STRATEGIC PLAN FY 2014-2018

OUR VISION Health and Wellness for all Arizonans

OUR MISSION

To promote, protect, and improve the health and wellness of individuals and communities in Arizona



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Office of the Director

150 N. 18th Avenue, Suite 500 Phoenix, Arizona 85007-3247 (602) 542-1025 (602) 542-1062 FAX azdhs.gov JANICE K. BREWER, GOVERNOR WILL HUMBLE, DIRECTOR

September 13, 2012

Dear Arizonans,

The goals of state government are many; most notably to do the work that is tasked to us by laws and mandates passed by the people and legislature. As we strive to achieve targeted public health outcomes with fewer resources and more public need, we are moving towards an era where ADHS is committed to working smarter, without compromising the high quality of work we do.

On a daily basis, the Department provides a wide array of public health prevention and preparedness related services including medical and childcare licensing, the State Public Health Laboratory, the State Hospital for psychiatric care, and a system around administering behavioral health services for the Medicaid population. All ADHS programs focus on incorporating evidence-based practices, building in more e-business solutions, and continuous quality improvement. The business and operations sector of our agency aligns our resources with key priorities to improve our efficiency as well as our customer service.

This year, we are paving the way on some new initiatives that will have a big impact on the health of Arizonans. A new era in behavioral health services has begun as we begin integrating physical and behavioral health services in a way that has never been done in Arizona. As a result, seriously mentally ill patients who typically die thirty years earlier than the average citizen, will have a better quality of life and lower health care costs.

Another large effort is focused on voluntary public health accreditation. We have aligned our strategic priorities with our mission, focusing efforts on winnable battles where we can move the needle on a few of our biggest public health issues over the next five years. The process will help us evaluate the quality of the ten essential public health services that we provide, and opportunities to better fortify our partnerships around the state will emerge. We are also developing ADHS into an academic health department, strengthening workforce development, and establishing more innovative and cross-jurisdictional partnerships to broaden our reach.

As always, we wish you health and wellness!

Will Humble MPH

Director

Executive Summary

The Arizona Department of Health Services (ADHS) is among the largest and most complex of state agencies. With over 1,600 employees and an annual budget in excess of \$1.8 billion, ADHS provides a wide variety of services and a diversity of programs housed within its five divisions: behavioral health; licensing; planning and operations; public health prevention; and public health preparedness. The two-fold mission of public health services includes prevention and preparedness for the state. The public behavioral health system oversees services for 150,000 enrolled clients and the state's only public psychiatric hospital, the Arizona State Hospital. The division for licensing is charged with certification of nursing homes, assisted

living and child care centers, hospitals and other health care facilities. The division of planning and operations oversees the budget, procurement, audit and special investigations, information technology, workforce development, rule making, human resources, policy, continuous quality improvement, and accreditation.

Changes in state funding have dramatically impacted ADHS and the way we have traditionally provided public health services. Adapting to the new mandates, ADHS saw an opportunity to reprioritize our programs and center attention on what is most important. The Department is working to be more efficient at delivering services to those

ADHS plans to bring quality improvement, lean methodologies, best practices, and strategic alignment to all we do.

populations most in need to keep our Arizona communities healthy and safe. ADHS believes every change is an opportunity to align and leverage our resources to achieve our mission.

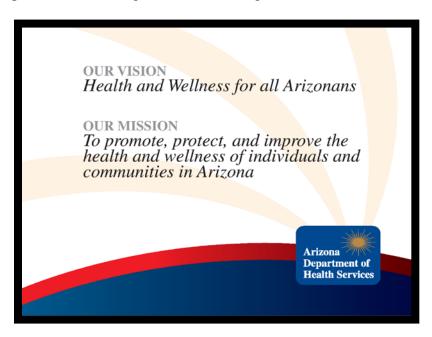
ADHS's Strategic Priorities for the next three to five years are:

- Impact Arizona's Winnable Battles
- Integrate Physical and Behavioral Health Services
- Promote and Protect Public Health and Safety
- Strengthen Statewide Public Health System
- Maximize ADHS Effectiveness

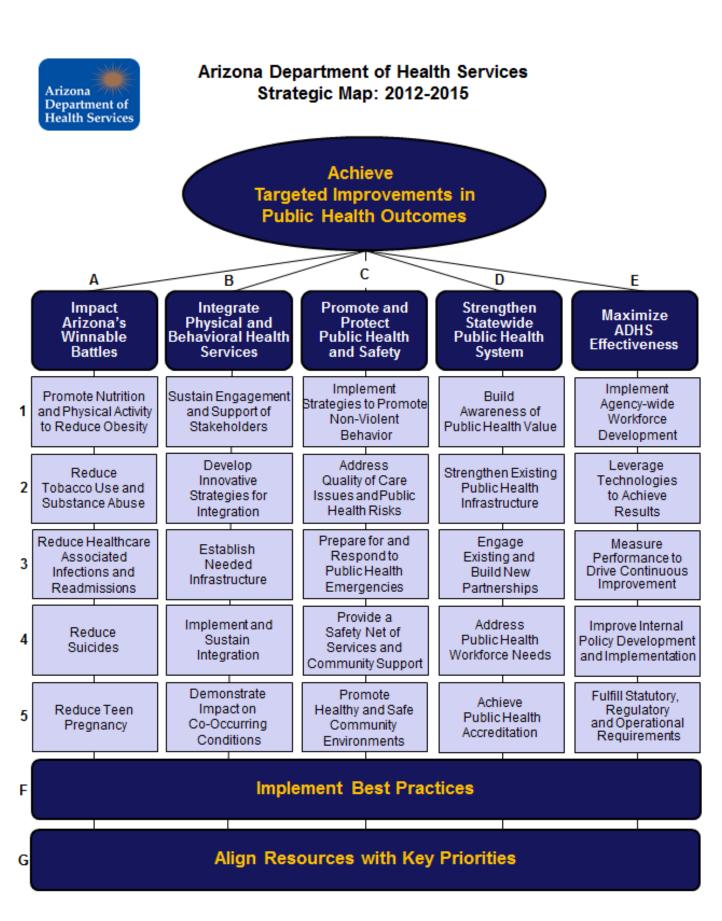
The strategic priorities are the pathways by which we plan to achieve targeted improvements in public health outcomes. ADHS is committed to moving along with our partners in local health departments toward voluntary public health accreditation. The work towards accreditation will require the agency to look at the statewide public health system as a whole, collaborate with stakeholders, and provide evidence that our work meets the ten essential public health services. The ten essential services were set as a national standard in 1994 by a steering committee consisting of all US Public Health Service agencies and representatives from other major public health organizations. Accreditation focuses on quality, transparency, and partnerships. Through the accreditation process, our leadership will identify strengths, weaknesses, and opportunities for continuing to build public health infrastructure in a way that will best align our resources with key priorities. ADHS plans to bring quality improvement, lean methodologies, best practices, and strategic alignment to all we do.

Mission and Vision Statement

The vision of the Department is to ideally achieve a state of Health and Wellness for all Arizonans, while the mission is to promote, protect, and improve the health and wellness of individuals and communities in Arizona. The updated mission and vision statements are helping us build public health value in-house as well as in the community. In an effort to improve the visibility of these critical documents, the format was modernized and ADHS is making an effort to educate our partners and reinvigorate staff on our goals.



To provide a framework for our mission, ADHS is utilizing a Strategic Map. The Strategic Map provides ADHS with a clear direction, a path for implementing each strategy, and an effective approach for engaging community involvement. The Strategic Map allows the entire agency to come together under a single public health umbrella concentrating on activities and resources that will achieve better public health outcomes. ADHS meeting spaces and buildings have updated versions of these documents to create an opportunity to share our map and vision with colleagues visiting our agency. Incorporating the strategic plan into all we do, will enable us to align the agency's resources and programs as we pave the way toward a new era in public health where improving quality and efficiency, while improving public health outcomes is the way we do business.



Strategic Map Key

Central Challenge

The oval at the top of the Strategic Map represents the central challenge that ADHS faces over the next three to five years. The focus of our strategic plan is to achieve targeted improvements in public health outcomes.

Strategic Priorities

The central challenge is supported by five strategic priorities. The strategic priorities define the major efforts requiring attention and resources to meet our central challenge. The priorities are listed on the Strategic Map as the column headings:

column A (Impact Arizona's Winnable Battles), column B (Integrate Physical and Behavioral Health Services), column C (Promote and Protect Public Health and Safety), column D (Strengthen Statewide Public Health System) and column E (Maximize ADHS Effectiveness).

Implementing best practices and aligning resources with key priorities are woven across all divisions and go deep into each program area.

Strategic Objectives

Each strategic priority is supported by five underlying strategic objectives. The objectives outline key elements

of each priority and most are broad in nature so as to capture the commonality that exists across many of our program areas. Each of the objectives have performance measures in order to track annual progress.

Cross-Cutting Strategic Priorities

The wide rectangles across the bottom of the map are cross-cutting strategic priorities. Cross-cutting strategic priorities are by definition:

- foundational to the strategy
- embedded in all other strategic priorities

For ADHS, the two foundational pieces do not require concerted resources, but are incorporated into all that we do. Implementing best practices and aligning resources with key priorities are woven across all divisions and go deep into each program area.

Strategic Priorities and Objectives

For each of the five strategic priorities that ADHS has outlined, there are correlating objectives delineated, each with dedicated performance measures that will enable us to capture our annual progress. Performance measures will allow the agency to gather data to objectively track progress on our strategic goals to proactively make adjustments as necessary to improve health outcomes. Implementation of the performance management system will include a yearly reporting on each measure in order to capture improvements, and to establish baseline measures. Measures are intended to capture the quality of work completed by ADHS and to assess the impact programs have made in a few key areas.

Strategic Priority #1: Impact Arizona's Winnable Battles

There are many funded efforts at a national level around Winnable Battles, where it is possible to show the impact of targeted efforts within a four year period. The following five winnable battles are objectives specific to the priority public health issues facing Arizonans that ADHS could positively impact in the next strategic period:

Objective 1: Promote Nutrition and Physical Activity to Reduce Obesity

The Agency, working with the community has the greatest opportunity to impact many public health outcomes to achieve this objective. An agency-wide workgroup will use evidenced based strategies to develop messaging, programming and outreach techniques to increase community awareness of obesity reduction strategies.

Performance Measures:

- Increase in the percent of adults who get the recommended amount of physical activity
- Increase in the percent of Arizonans who report eating the recommended amounts of fruits and veggies

Objective 2: Reduce Tobacco Use and Substance Abuse

Connecting all areas of the agency around this objective places resources into the hands of the citizens and providers to help Arizonan's either quit smoking via the ASHLine, or seek help for substance abuse through prevention programs and policy changes.

- Decrease the percent of high school youth who smoked in the last month
- Decrease the smoking prevalence among adults, 18 years and older, who are current cigarette smokers
- Increase the percent of behavioral health clients with reduced use of alcohol and drugs

• Increase the percent of behavioral health clients employed or involved in workrelated activities after completion of substance abuse treatment

Objective 3: Reduce Healthcare Associated Infections (HAI) and Readmissions

The HAI Advisory Committee will prioritize efforts and leverage resources across ADHS to work with partners to reduce infections acquired in health care settings and improve health outcomes.

Performance Measures:

- Decrease the rate of Central Line-Associated Bloodstream Infections (CLABSI)
- Increase the percent of technical assistance provided to facility or local health department conducting investigations of reported HAI outbreaks

Objective 4: Reduce Suicides

Successful evidence based prevention strategies will be employed to reduce the suicide rates among adults and teenagers. Collaboration across the agency will chart a path for additional work in this area.

Performance Measures:

- Decrease the rate of suicide deaths among Arizonans
- Decrease the rate of suicide deaths among teens aged 15-19 years

Objective 5: Reduce Teen Pregnancy

Recent declines in Arizona's teen pregnancy rate are dramatic. ADHS is committed to continuing to focus on this important objective through the work currently provided as well as on-going collaboration with stakeholders.

Performance Measures:

• Decrease the birth rate for teenagers aged 15-17

Strategic Priority #2: Integrate Physical and Behavioral Health

ADHS recognizes that integrated care between physical and behavioral health services will greatly impact public health outcomes for the behavioral health population. Our goal is to promote recovery, resiliency, psychosocial rehabilitation, safety and hope for persons with serious mental illness enrolled in the community-based behavioral health system. This effort will involve collaboration with community partners, public health, and other stakeholders in the design and delivery of integrated behavioral health services. Ultimately, the goal to increase the availability and utilization of peer support and family support services, decrease readmission rates to Level I facilities, and increase/maintain timely access to services. The second Strategic Priority for the agency is to develop a model for integrated care by working through the following Strategic Objectives:

Objective 1: Sustain Engagement and Support of Stakeholders

ADHS is collaborating with stakeholders to expand integration efforts to provide whole health care for SMI patients in Maricopa County starting next year, with a long-term plan to roll out these same services statewide to all behavioral health populations in the following 3-5 years.

Performance Measures:

- Increase the number of on-site technical assistance visits by the division of licensing to promote the licensing of integrated health care facilities
- Increase the stakeholder input for proposed RBHA with SMI health homes
- Increase the number of hits to the Behavioral Health integration website

Objective 2: Develop Innovative Strategies for Integration

One of the foundational concepts of all integrated care models is the "health home". This concept originated in the primary care setting and is also referred to as a patient-centered medical home, a place where a person may receive treatment to address both physical and behavioral health care needs. ADHS along with key stakeholders is working on developing such a model.

- Design integrated healthcare license with input from stakeholders and draft rules for necessary policy changes
- Increase the number of completed cross-agency activities and collaborations that promote behavioral health and physical health integration
- Increase cross collaborative activities within ADHS on grant opportunities and outreach

Objective 3: Establish Needed Infrastructure

As models and strategies are defined, ADHS will develop the necessary training, information technology and business infrastructure to support this effort.

Performance Measures:

- Complete the procurement process for integrated care services in Maricopa County
- Increase the percent of patients being discharged from ASH who have a medical and psychiatric follow-up appointment scheduled within 30 days

Objective 4: Implement and Sustain Integration

ADHS is committed to full implementation and sustainability of integrated behavioral health models. A pilot effort is ongoing around integrating the behavioral and physical health services of the seriously mentally ill population in Maricopa County, with long term plans to integrate the entirety of public behavioral health services.

Performance Measures:

- Fully implement a Managed Care Organization (MCO) to serve as the regional Behavioral Health Authorities (RBHAs) that offer integrated care to Title XIX eligible individuals determined to have a serious mental illness
- Increase the percent of eligible Title XIX population enrolled in behavioral health treatment programs

Objective 5: Demonstrate Impact on Co-Occurring Conditions

As systems of integration of behavioral health systems are implemented, performance measures will be built into an evaluation plan to measure the impact on patients with three or more co-occurring conditions.

Performance Measures:

 Increase the percent of Title XIX SMI with three or more co-morbid conditions enrolled in the Managed Care Program through the RBHA offering integrated care services

Strategic Priority #3: Promote and Protect Public Health and Safety

The public looks to ADHS as the public health authority for information on a variety of issues including licensing, handling emergencies, preventing communicable disease outbreaks, identifying food borne illness, and improving safety and well being. The third strategic priority requires our programs to think creatively how they may impact the following Strategic Objectives:

Objective 1: Implement Strategies to Promote Non-Violent Behavior

Identifying and collaborating on efforts to reduce violence is an issue of great importance in Public Health. Encouraging all programs to think about the trauma caused by violence and the long-term effects on individuals and society will foster a culture of creative, successful interventions.

Performance Measures:

- Decrease the percent of high school students who report having experienced physical violence by a dating partner
- Increase the percent of ASH direct care staff trained in non-violent crisis intervention through the Crisis Prevention Institute

Objective 2: Address Quality of Care Issues and Public Health Risks

Childcare and health care licensing programs, as well as environmental laboratory licensing allows ADHS to ensure a minimum standard of services and is an important factor in protecting the safety of the citizens of Arizona.

Performance Measures:

- Increase the percent of child care complaint investigations initiated within investigative guidelines
- Increase the percent of child care license renewals granted within licensing timeframes
- Increase the percent of health care complaint investigations initiated within investigative guidelines

Objective 3: Prepare for and Respond to Public Health Emergencies

Wildfires, food borne illness, and the H1N1 pandemic are all the types of public health crisis to which ADHS must be prepared to respond. The agency takes great pride in the work accomplished in this area. This objective supports all programs that focus on preparedness and continuity planning.

Performance Measures:

- Increase the number of public health and emergency response professionals on the volunteer Health Alert Network
- Increase the number of key Tribal public health organizations contracted and engaged in a significant public health emergency preparedness activity
- Increase the percent of communicable disease outbreak investigations initiated within 48 hours of reporting to ADHS
- Increase the percent of reportable disease results submitted to ADHS by providers within State required time frames

Objective 4: Provide a Safety Net of Services and Community Support

ADHS is for many, a source of support and/or services. This objective highlights the work already in place to provide public health services, community support and encourages connections with the numerous community stakeholders to leverage resources in new and creative ways.

Performance Measures:

- Increase the percent of health care licensure renewals granted within licensing timeframes
- Increase the percent of breast, cervical and colorectal cancer recommended screenings

Objective 5: Promote Healthy and Safe Community Environments

This objective is modeled after the US Department of Health and Human Services National Prevention Strategy's focus on safe environments to provide drug free, gang free, non-violent safe communities for residents to thrive and live more healthily. Also, this effort emphasizes the ability to create sustainable, green spaces minimizing environmental hazards and threats of food borne illness, toxic exposures, and pandemics.

- Increase the immunization rate among 2-year old children
- Increase the percent of communicable disease outbreak investigations initiated within 48 hours of reporting to ADHS
- Increase the percent of monthly infectious disease trainings to county health departments conducted on schedule

Strategic Priority #4: Strengthen Statewide Public Health Infrastructure

Focusing on external stakeholders, the fourth strategic priority is to strengthen the statewide public health infrastructure, which is critical to the success of ADHS programs. Without community support, ADHS could not function effectively. We work with all our partners including county health departments on communication, planning, resource allocation, and program development efforts. ADHS provides support to the Indian Tribes of Arizona, the urban Indian health programs, the Inter Tribal Council of Arizona, and the Indian Health Service in accomplishing their public health goals and objectives. Additionally, we coordinate and integrate cross-border public health program efforts. The following Strategic Objectives focus on the importance of the agency's relationships and collaborations:

Objective 1: Build Awareness of Public Health Value

Key stakeholders, policy makers, and the community at large understand the role that we all play in public health. This effort requires coordination, outreach, and communication internally as well as externally.

Performance Measure:

- Increase the percent of new staff completing ADHS scope of public health services and responsibilities coursework
- Increase staff's understanding of the scope of ADHS public health services and responsibilities by twenty percent
- Increase the number of EMS agencies that contribute data to AZ-PIERS

Objective 2: Strengthen Existing Public Health Infrastructure

Implementing our public health plans and strategies rely heavily on the buy in of our local, tribal and border health partners as well as the many private and community partners we work with on a daily basis.

Performance Measures:

- Increase the percent of monthly ALHOA meetings conducted on schedule to engage county partners
- Increase the percent of border health meeting attendees expressing satisfaction with the Border Health Program

Objective 3: Engage Existing and Build New Partnerships

Identifying new cross-jurisdictional partners and innovative new business enterprise solutions will enhance the connection to the community and increase the agency's ability to find solutions to emerging public health issues.

Performance Measure:

- Increase the percent of technical assistance requests from Native Health partners that are completed
- Increase the number of new activities or partnerships developed to establish ADHS as an Academic Health Department

Objective 4: Address Public Health Workforce Needs

ADHS is seeking to increase the talent pool attracted to careers in public health. By creating new cross jurisdictional partnerships and partnering with Universities and other professional development organizations, ADHS will encourage potential talent that the work of ADHS is exciting and meaningful to the public.

Performance Measures:

- Increase the number of new AZ Public Health Training Center (AZPHTC) classes and trainings offered
- Increase the number of ADHS interns

Objective 5: Achieve Public Health Accreditation

ADHS is in the process of completing the prerequisites and requirements needed for the state to achieve accreditation, analyzing our collaborations with stakeholders as well as our ability to perform effectively on the ten essential public health services. These ten essential services were established in 1994 by a Core Public Health Functions Steering Committee that included representatives from US Public Health Service agencies and other major public health organizations who were tasked with developing a national framework. The ten essential services include: Monitor health status, Diagnose and Investigate health problems and hazards, Inform and Educate to empower people about health issues, Mobilize community partnerships, Develop policies and plans, Enforce laws and regulations, Link people to health services, Assure competent health workforce, Evaluate effectiveness and quality, and Research to find innovative solutions to health problems. Ultimately, the accreditation effort will improve the quality of public services in Arizona, as well as impact public health outcomes for our citizens.

- Increase the percent completion of prerequisites for accreditation
- Increase the percent completion of required Domain Documentation
- Increase the percent of PHAB requirements completed according to ADHS timeline

Strategic Priority #5: Maximize ADHS Effectiveness

The fifth and final Strategic Priority promotes a business model that strives to improve internal processes by improving efficiency. The consolidation of programs and staff over the past several years yielded an opportunity to partner internally in new and exciting ways. These efforts have led to development of user-friendly policies and procedures that contribute to increased operational efficiencies, and refinement of information technology policies and procedures to address new security concerns, emerging technology, and business needs. ADHS provides a highly available and flexible information technology environment that supports the implementation and maintenance of enterprise applications, business communications, and internet-based public services. The following Strategic Objectives focus on innovative methods of providing the services by integrating our lines of business to increase efficiency and effectiveness.

Objective 1: Implement Agency-wide Workforce Development

In order to retain, promote and recruit talent, ADHS must focus on investing in workforce development. This effort will look at integrating training, retention, and succession planning across the agency.

Performance Measures:

- Decrease the percent of agency staff turnover
- Decrease the percent of ASH staff turnover during the first 12 months of employment
- Increase the percent completion of ADOA online Supervisory Academy courses within 6 months of hire/promotion
- Increase the percent of new ASH staff participating in workforce development training within 90 days of New Employee Orientation

Objective 2: Leverage Technologies to Achieve Results

ADHS is committed to looking for new and existing technology to increase efficiency. Creating more e-government solutions, using state of the art technology in our State Lab and ASH help ensure higher quality results.

- Increase the percent of new e-government applications implemented on schedule
- Increase the number of electronic data exchanges with Shareholders/ partners
- Increase the percent of communicable disease lab reports received electronically

Objective 3: Measure Performance to Drive Continuous Improvement

Continuous Quality Improvement is the foundation of an effective public health system. ADHS is implementing a performance management system throughout the agency.

Performance Measures:

- Increase the percent of CQI projects completed on schedule
- Increase the percent of audit investigations with results triggering action that are completed
- Increase the percent of microbiological and chemical proficiency test samples meeting national standards

Objective 4: Improve Internal Policy Development and Implementation

ADHS is continuously working to address policy making procedures and guidelines. This effort will streamline the process to provide coordination in an effort to produce timely, effective and user-friendly policies, procedures and guidelines.

Performance Measures:

- Percent of existing policies that are reviewed according to agency schedule
- Percent of procurement staff's knowledge of procurement policies and process

Objective 5: Fulfill Statutory Regulatory and Operational Requirements

An extensive responsibility for ADHS is fulfilling legal mandates, and enforcing the rules and regulations around many public health programs. Additionally, we have various operational requirements that we maintain to meet either state or federal guidelines.

- Percent of Director's Decisions each calendar year issued by the Department within 30 days after receipt of the corresponding administrative law judge (ALJ) recommendation
- Percent of rules approved on the first hearing by GRRC
- Percent of inspection letters or status reports sent out to the licensed clinical and environmental laboratories within 45 days of the onsite inspection
- Percent of Arizona Biomedical Research Commission research contracts that are in compliance

Cross Cutting Strategies

- Implement Best Practices
- Align Resources with Key Priorities

The last two boxes across the bottom are the Cross-Cutting Strategic Priorities; they span all areas of work and are the foundation for the Strategic Map. All programs and divisions implement best practices as a proven method for achieving results, and throughout the agency we are aligning resources with our key priorities. These two cross cutting measures are entrenched into the way we operate and function as an agency.

Department of Health Services

Resource Assumptions (agency level)

Five-Year Strategic Plan

Current Year (FY 2013) and Future Years FY 2014 - FY 2018

	FY 2013	FY 2014 Budget	FY 2015 Budget	FY 2016 Budget	FY 2017 Budget	FY 2018 Budget
	Appropriation	Request	Estimate	<u>Estimate</u>	Estimate	<u>Estimate</u>
Full-time equivalent (FTE)						
Positions	1,782.0	1,782.0	1,782.0	1,782.0	1,782.0	1,782.0
General Fund	587,120,701	609,932,881	644,540,361	681,145,474	719,864,262	762,259,251
Other Appropriated Funds	88,817,300	89,219,900	91,093,518	93,006,482	94,959,618	97,143,689
Non-Appropriated Funds	1,392,046,006	1,497,289,667	1,582,539,132	1,672,715,748	1,768,105,866	1,872,548,727
Federal Funds	314,980,400	314,980,400	321,594,988	328,348,483	335,243,801	342,954,409
Total Agency Funds	2,382,964,407	2,511,422,848	2,639,768,000	2,775,216,187	2,918,173,547	3,074,906,076
Assumptions:						

- 1. The Resource Assumption estimate assumes full funding for the Department's Decision Packages in the FY 2014 budget.
- 2. The FY 2014 Budget was used as the base to project estimates for FY 2015 through FY 2018. An annual inflation factor (CPI) of 2.1% for FY 2015 FY 2017 and 2.3% for FY 2018* were added.
- 3. 3.73%** increase for medical inflation was estimated for Behavioral Health programs, General Fund area and non-appropriated fund area from FY 2015 FY 2018.
- 4. Possible changes in FTE Positions are not projected in this Resource Assumption.
- * Source: An Update to the Budget and Economic Outlook: Fiscal Years 2012 to 2022 produced by Congressional Budget Office as of August 22,2012. http://www.cbo.gov/sites/default/files/cbofiles/attachments/08-22-2012-Update to Outlook.pdf on page 7 of the pdf document.
- ** Source: FY 2011 HHS Agency Financial Report produced by Department of Health and Human Services (HHS) as of November 15,2011. http://www.hhs.gov/afr/2011afr.pdf on page 118 of the pdf document.

Department of Health Services Division of Planning and Operations Resource Assumptions

Five-Year Strategic Plan

	FY 2013 Appropriation	FY 2014 Budget Request	FY 2015 Budget Estimate	FY 2016 Budget Estimate	FY 2017 Budget Estimate	FY 2018 Budget Estimate
Full-time equivalent (FTE) Positions	187.7	187.7	187.7	187.7	187.7	187.7
General Fund	10,781,476	10,781,476	11,007,887	11,239,053	11,475,073	11,738,999
Other Appropriated Funds	10,263,300	10,263,300	10,478,829	10,698,885	10,923,561	11,174,803
Non-Appropriated Funds	0	0	0	0	0	C
Federal Funds	875,000	875,000	893,375	912,136	931,291	952,710
Total Funds	21,919,776	21,919,776	22,380,091	22,850,073	23,329,925	23,866,513
Assumptions:						

^{1.} The FY 2014 Budget was used as the base to project estimates for FY 2015 through FY 2018. An annual inflation factor (CPI) of 2.1% for FY 2015 - FY 2017 and 2.3% for FY 2018* were added.

Department of Health Services

Division of Licensing Services Resource Assumptions

Five-Year Strategic Plan

	FY 2013 Appropriation	FY 2014 Budget Request	FY 2015 Budget Estimate	FY 2016 Budget Estimate	FY 2017 Budget Estimate	FY 2018 Budget Estimate
Full-time equivalent (FTE) Positions	204.9	204.9	204.9	204.9	204.9	204.9
General Fund	0	0	0	0	0	0
Other Appropriated Funds	9,481,700	9,884,300	10,091,870	10,303,800	10,520,179	10,762,143
Non-Appropriated Funds	1,872,920	1,872,920	1,912,251	1,952,409	1,993,409	2,039,258
Federal Funds	4,568,600	4,568,600	4,664,541	4,762,496	4,862,508	4,974,346
Total Funds	15,923,220	16,325,820	16,668,662	17,018,704	17,376,097	17,775,747
Assumptions:						

^{1.} The FY 2015 through FY 2018 projections assume continued committed funding by the state for Maintenance of Effort and State Match requirements to draw down federal funding.

^{2.} The FY 2014 Budget was used as the base to project estimates for FY 2015 through FY 2018. An annual inflation factor (CPI) of 2.1% for FY 2015 - FY 2017 and 2.3% for FY 2018* were added.

Department of Health Services Division of Behavioral Health Services

Resource Assumptions
Five-Year Strategic Plan

	FY 2013 Appropriation	FY 2014 Budget Request	FY 2015 Budget Estimate	FY 2016 Budget Estimate	FY 2017 Budget Estimate	FY 2018 Budget Estimate
Full-time equivalent						
(FTE) Positions	884.1	884.1	884.1	884.1	884.1	884.1
General Fund	561,608,461	584,420,641	618,492,364	654,550,469	692,710,762	734,481,220
Other Appropriated Funds	51,554,000	51,554,000	52,636,634	53,742,003	54,870,585	56,132,609
Non-Appropriated Funds	1,337,286,686	1,442,530,347	1,526,629,866	1,615,632,387	1,709,823,756	1,812,926,128
Federal Funds	48,424,000	48,424,000	49,440,904	50,479,163	51,539,225	52,724,628
Total Funds	1,998,873,147	2,126,928,988	2,247,199,769	2,374,404,023	2,508,944,328	2,656,264,585
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Assumptions:

^{1.} The FY 2015 through FY 2018 projections assume continued committed funding by the state for Maintenance of Effort and State Match requirements to draw down federal funding.

^{2.} The FY 2014 Budget was used as the base to project estimates for FY 2015 through FY 2018. An annual inflation factor (CPI) of 2.1% for FY 2015 - FY 2017 and 2.3% for FY 2018* were added.

^{3. 3.73%**} increase for medical inflation was estimated for Behavioral Health programs, General Fund area and non-appropriated fund area from FY 2015 - FY 2018.

Department of Health Services Division of Public Health Services Resource Assumptions

Five-Year Strategic Plan

	FY 2013 Appropriation	FY 2014 Budget Request	FY 2015 Budget Estimate	FY 2016 Budget Estimate	FY 2017 Budget Estimate	FY 2018 Budget Estimate
Full-time equivalent						
(FTE) Positions	505.4	505.4	505.4	505.4	505.4	505.4
General Fund	14,730,764	14,730,764	15,040,110	15,355,952	15,678,427	16,039,031
Other Appropriated Funds	17,518,300	17,518,300	17,886,184	18,261,794	18,645,292	19,074,134
Non-Appropriated Funds	52,886,400	52,886,400	53,997,014	55,130,952	56,288,702	57,583,342
Federal Funds	261,112,800	261,112,800	266,596,169	272,194,688	277,910,777	284,302,725
Total Funds	346,248,264	346,248,264	353,519,478	360,943,387	368,523,198	376,999,231
Assumptions:						
Account priories						

^{1.} The FY 2015 through FY 2018 projections assume continued committed funding by the state for Maintenance of Effort and State Match requirements to draw down federal funding.

^{2.} The FY 2014 Budget was used as the base to project estimates for FY 2015 through FY 2018. An annual inflation factor (CPI) of 2.1% for FY 2015 - FY 2017 and 2.3% for FY 2018* were added.