

DEPARTMENT OF HEALTH SERVICES

Omnibus Motion

Motion:

Move to incorporate the following items into the substitute amendment:

Medical Assistance -- Eligibility and Benefits

1. *Medical Assistance Cost-to-Continue Estimate (LFB Issue Paper #405)*. Adopt the MA cost-to-continue reestimate under Alternative A, which would provide funding increases of \$1,113,486,100 (\$113,687,700 GPR, \$618,648,900 FED, \$82,458,000 PR, \$298,691,500 SEG) in 2023-24 and \$583,544,500 (\$240,502,500 GPR, \$326,565,800 FED, \$38,064,300 PR, and -\$21,588,100 SEG) in 2024-25.

2. *Medical Assistance Provider Reimbursement Rates: Hospitals--Base Reimbursement (LFB Issue Paper #407)*. Adopt Alternative A1, which would provide \$22,716,300 (\$8,741,200 GPR and \$13,975,100 FED) in 2023-24 and \$45,432,500 (\$17,859,500 GPR and \$27,573,000 FED) in 2024-25 to increase base MA reimbursement for hospital services effective January 1, 2024.

3. *Medical Assistance Provider Reimbursement Rates: Hospitals--Graduate Medical Education Supplement (LFB Issue Paper #407)*. Provide \$937,500 (\$360,800 GPR and \$576,700 FED) in 2023-24 and \$937,500 (\$366,900 GPR and \$570,600 FED) in 2024-25 to increase funding for grants for establishing new and for expand existing residency programs. Increase a statutory limit on the term of grants provided to support the establishment of new residency programs from three years to five years.

4. *Medical Assistance Provider Reimbursement Rates: Primary Care Providers (LFB Issue Paper #407)*. Provide \$44,216,800 (\$17,394,900 GPR and \$26,821,900 FED) in 2023-24 and \$88,433,600 (\$34,763,200 GPR and \$53,670,300 FED) in 2024-25 to support the estimated cost of increasing MA reimbursement rates for evaluation and management procedure codes to 70% of the Medicare rates.

5. *Medical Assistance Provider Reimbursement Rates: Emergency Department Physicians (LFB Issue Paper #407)*. Adopt Alternative D3, which would provide \$5,118,700 (\$1,969,700 GPR and \$3,149,000 FED) in 2023-24 and \$10,237,300 (\$4,024,300 GPR and \$6,213,000 FED) in 2024-25 to increase MA reimbursement for emergency department patient evaluations to 40% of Medicare rates.

6. *SeniorCare Reestimate (LFB Issue Paper #410)*. Adopt the modification, which would reflect a reestimate of the SeniorCare cost-to-continue, providing funding of \$5,489,500 (\$6,605,100 GPR, \$1,828,800 FED, and -\$2,944,400 PR) in 2023-24 and \$16,958,800 (\$5,477,800 GPR, \$4,167,200 FED, and \$7,313,800 PR) in 2024-25.

7. *Wisconsin Chronic Disease Program Reestimate (LFB Summary, Page 258, #31)*. Decrease funding by \$1,035,800 (-\$643,600 GPR and -\$392,200 PR) in 2023-24 and \$1,089,500 (-\$688,100 GPR and -\$401,400 PR) in 2024-25 to reflect estimates of the amounts needed to fully fund the Wisconsin chronic disease program in the 2023-25 biennium.

8. *Disproportionate Share Hospital Payments*. Increase the amount of state funding that DHS must allocate annually for disproportionate share hospital (DSH) payments from \$47,500,000 GPR to \$71,600,000 GPR. Provide funding increase of \$62,630,000 (\$24,100,000 GPR and \$38,530,000 FED) in 2023-24 and \$61,308,000 (\$24,100,000 GPR and \$37,208,000 FED) in 2024-25 to support the increase in the state share of the DSH payments and to reflect the federal matching funds for the payments.

9. *Hospital Reimbursement for Behavioral Health Units in General Medical and Surgical Hospitals*. Provide \$10,168,000 (\$4,000,000 GPR and \$6,168,000 FED) and \$20,351,000 (\$8,000,000 GPR and \$12,351,000 FED) to increase the MA reimbursement rate for hospital services provided in a behavioral health unit of a general medical and surgical hospital, effective January 1, 2024.

10. *Rural Critical Care Access Hospital Supplement Payment*. Increase the amount of state funding that DHS must allocate annually for rural critical care access hospital supplement payments from \$2,250,000 GPR to \$4,500,000 GPR. Provide funding increases of \$5,847,000 (\$2,250,000 GPR and \$3,597,000 FED) in 2023-24 and \$5,724,000 (\$2,250,000 GPR and \$3,474,000 FED) in 2024-25 to support the increase in the state share of the supplemental payments and to reflect the federal matching funds for the payments.

11. *Reimbursement Rate for Chiropractic Services -- Parity with Physician Rates*. Provide \$600,000 (\$200,000 GPR and \$400,000 FED) in 2023-24 and \$1,200,000 (\$500,000 GPR and \$700,000 FED) in 2024-25 to support the estimated cost of increasing reimbursement rates paid under MA for chiropractic services to the same rate paid to physicians, applicable to procedure codes for which both a chiropractor and a physician are allowed to claim reimbursement, effective January 1, 2024.

12. *Deadline for Implementing Dental Services Reimbursement Rate Increase*. Require DHS, by October 1, 2023, to implement the reimbursement rate increase for dental services rendered by facilities that provide at least 90 percent of their dental services to individuals with cognitive and physical disabilities that was included in the 2017-19 budget act.

13. *Prohibit MA Payment for Puberty-Blocking Drugs or Gender Reassignment Surgery*. Specify that, to the extent permitted by federal law, MA may not provide payment for puberty-blocking drugs used for the purposes of gender dysphoria or gender transition, or gender reassignment surgery.

Medical Assistance -- Long-Term Care

14. *Home and Community Based Services Rate Increase Cost-to-Continue (LFB Issue Paper #420)*. Adopt Alternative A1 to provide \$43,707,300 (\$17,194,500 GPR and \$26,512,800 FED) in 2023-24 and \$181,951,800 (\$71,525,000 GPR and \$110,426,800 FED) in 2024-25 to fund costs associated with continuing the ARPA HCBS 5% rate increase from April 1, 2024, through June 30, 2025.

15. *Family Care Direct Care Reimbursement (LFB Issue Paper #420)*. Adopt Alternative B2 to provide \$12,993,800 (\$5,000,000 GPR and \$7,993,800 FED) in 2023-24 and \$25,438,800 (\$10,000,000 GPR and \$15,438,800 FED) in 2024-25 to increase the direct care and services portion of the capitation rates the Department provides to MCOs to fund long-term care services for individuals enrolled in Family Care.

16. *Personal Care Reimbursement (LFB Issue Paper #420)*. Adopt Alternative C3 to provide \$12,993,800 (\$5,000,000 GPR and \$7,993,800 FED) in 2023-24 and \$25,438,800 (\$10,000,000 GPR and \$15,438,800 FED) in 2024-25 to increase MA personal care reimbursement rates.

17. *Nursing Home Personal Needs Allowance (LFB Issue Paper #422)*. Adopt Alternative 1 to increase the monthly MA personal needs allowance by \$10, from \$45 to \$55, effective July 1, 2024. Increase MA benefits funding by \$2,060,000 (\$806,100 GPR and \$1,253,900 FED) in 2024-25.

18. *Nursing Home Support Services*. Provide \$73,200,000 (\$28,167,400 GPR and \$45,032,600 FED) in 2023-24 and \$73,200,000 (\$28,774,900 GPR and \$44,425,100 FED) in 2024-25 to increase the support services portion of Medical Assistance program reimbursement for nursing homes. Require the Department to establish and implement a priced rate for nursing home support services based on median facility costs plus 25 percent.

19. *Nursing Home Incentives*. Provide \$15,600,000 (\$6,002,900 GPR and \$9,597,100 FED) in 2023-24 and \$15,600,000 (\$6,132,400 GPR and \$9,467,600 FED) in 2024-25 to exclude provide incentives from the profit limitation in support services so they are paid separately. Require DHS to exclude provider incentives when determining the total rate adjustment to allowable costs.

20. *Nursing Home Ventilator Dependent Rate*. Provide \$5,000,000 (\$1,924,000 GPR and \$3,076,000 FED) in 2023-24 and \$5,000,000 (\$1,965,500 GPR and \$3,034,500 FED) in 2024-25 to increase the all-encompassing ventilator-dependent resident reimbursement rate for nursing home care. Require the Department to increase the reimbursement rate under the Medical Assistance program for an authorized facility treating a resident of the facility who has received prior authorization for ventilator-dependent care reimbursed under the all-encompassing ventilator-dependent resident reimbursement rate by \$200 per patient day.

21. *DHS and Managed Care Organization Reporting Requirements*. Require DHS to include information regarding (a) executive leadership salaries and (b) amounts retrieved by the state under the contractual risk corridors, in the publicly available financial summaries for Family Care, Family Care Partnership, and PACE managed care organization. Require DHS and Family Care,

Family Care Partnership, and PACE managed care organization (MCO) to track and annually report to the Joint Committee on Finance total authorized and total provided care plan hours by service category and MCO.

Services for the Elderly and People with Disabilities

22. *Aging and Disability Resource Centers (LFB Issue Paper #425)*. Adopt Alternative 3 to provide \$2,513,700 GPR in 2023-24 and \$5,027,400 GPR in 2024-25 to increase ADRC base allocations.

23. *Complex Patient Pilot Program (LFB Issue Paper #426)*. Modify Alternative 2 to provide \$5,000,000 GPR in 2023-24 on a one-time basis in the JFC program supplements appropriation. Create a GPR appropriation in DHS for this purpose.

24. *Adult Protective Services System (LFB Issue Paper #427)*. Modify Alternative 2a to provide \$1,000,000 GPR annually to increase funding for adult protective services.

25. *WisCaregiver Careers (LFB Issue Paper #428)*. Modify Alternative 2 to provide \$2,000,000 GPR in 2024-25, on a one-time basis, to fund the WisCaregiver Career program.

26. *Alzheimer's Family and Caregiver Support Program (LFB Paper #430)*. Modify Alternative A2 to provide \$250,000 GPR annually and increase the maximum amount of funding the Department may provide under the Alzheimer's family and caregiver support program from \$2,808,900 to \$3,058,900 annually.

27. *Home Delivered Meals*. Provide \$225,000 GPR annually to increase funding available for home-delivered meals. Require DHS to provide a state supplement to the federal congregate nutrition projects of \$900,000 for home delivered meals.

Public Health

28. *Grants to Free and Charitable Clinics (LFB Paper #439)*. Provide \$750,000 GPR annually to increase grants to free and charitable clinics. Modify the statutory requirement to distribute these grants to reflect the increased amount.

29. *Dentistry Residency*. Provide \$5,000,000 GPR in 2023-24 in the Joint Committee on Finance program supplements appropriation for establishing a general dentistry residency program for the Marquette Dental School.

30. *Surgical Collaborative of Wisconsin*. Provide \$150,000 GPR annually in one-time funding for making grants to the Surgical Collaborative of Wisconsin.

31. *Allied Health Professional Training*. Provide \$2,500,000 GPR annually in one-time funding to expand allied health professional education and training grants. Modify statute to expand eligibility for the program to include registered nurses.

32. *Program Operations Funding Reduction*. Reduce funding in the Division of Public Health's general program operations appropriation by \$76,700 GPR annually.

Behavioral Health

33. *Crisis Urgent Care and Observation Facilities (LFB Issue Paper #445)*. Provide \$10,000,000 GPR in 2023-24 in the Joint Committee on Finance program supplements appropriation for regional crisis urgent care and observation facilities. Create a GPR, biennial appropriation in DHS for making grants to support crisis urgent care and observation facilities.

34. *Mental Health Consultation Program (LFB Issue Paper #448)*. Adopt Alternative B1, which would reduce funding by \$266,700 GPR annually for mental health pilot projects and repeal the mental health pilot projects appropriation and the authorizing statutes for the behavioral health care coordination pilot project and the psychiatric consultation reimbursement pilot project, and would increase estimated GPR lapses by \$1,958,600 in 2023-24 to reflect the lapse of the uncommitted continuing balance in the appropriation.

35. *School-Based Mental Health Consultation Pilot Program (LFB Summary, Page 289, #15)*. Delete the appropriation and associated program language for the school-based mental health consultation pilot program, and reduce funding by \$175,000 GPR annually to eliminate base funding for the program.

36. *Telemedicine Crisis Response Pilot Program*. Provide \$2,000,000 GPR in 2023-24 in the Joint Committee on Finance program supplements appropriation for a telemedicine crisis response pilot program.

Care and Treatment Facilities

37. *Facility Food and Variable Nonfood Supplies and Services (LFB Issue Paper #455)*. Adopt Alternative A1, which would provide funding increases for the Department's care and treatment facilities, as follows: (a) \$51,115,800 (\$9,424,600 GPR and \$41,691,200 PR) in 2023-24 and \$58,807,600 (\$12,618,400 GPR and \$46,189,200 PR) in 2024-25 to reflect a reestimate of the cost of variable nonfood supplies and services; and (b) \$1,187,900 (\$720,600 GPR and \$467,300 PR) in 2023-24 and \$1,318,500 (\$795,300 GPR and \$523,200 PR) in 2024-25 to reflect a reestimate of the cost of food. Adopt Alternative B2, which would provide \$1,095,200 (\$676,400 GPR and \$418,800 PR) in 2023-24 and \$1,604,400 (\$951,100 GPR and \$653,300 PR) in 2024-25 for electronic health record costs.

38. *Overtime Supplement (LFB Issue Paper #456)*. Adopt Alternative 1, which would provide \$6,930,300 (\$6,152,800 GPR and \$777,500 PR) annually to reflect a reestimate of the overtime supplement at the Department's facilities.

39. *Mendota Juvenile Treatment Center -- Staffing and Funding for Expansion (LFB Issue Paper #457)*. Adopt Alternative B2, which would provide \$447,300 PR in 2023-24 and \$637,100 PR in 2024-25 to increase budget authority in DOC for a transfer to DHS related to payments for juveniles placed at MJTC.

40. *Expand Northern Wisconsin Center's Intensive Treatment Program (LFB Issue Paper #458)*. Adopt Alternative B2 to authorize DHS to retain \$3.0 million in 2023-24 and \$3.0 million in 2024-25 (of which \$1.0 million annually was already approved in 2017 Act 59). Increase estimated general fund revenues by \$2.9 million in 2023-24 and \$3.0 million in 2024-25.

41. *Contracted Community Services (LFB Issue Paper #459)*. Adopt Alternative 1, which would provide \$3,411,900 GPR in 2023-24 and \$5,432,300 GPR in 2024-25 to reflect a reestimate of forensic and civil mental health contract costs.

42. *Mental Health Institutes Fund Source Reallocation (LFB Summary, Page 297, #10)*. Reduce funding by \$6,116,600 GPR in 2023-24 and \$6,365,400 GPR in 2024-25, reduce positions by 56.77 GPR in 2023-24 and 59.10 GPR in 2024-25, and provide corresponding PR funding and position increases to reallocate the funding source for services provided at the state mental health institutes.

43. *Fuel and Utilities (LFB Summary, Page 298, #12)*. Provide \$10,100 GPR in 2023-24 and \$86,900 GPR in 2024-25 to reflect an estimate of GPR-funded fuel and utilities costs at the care and treatment facilities.

Quality Assurance

44. *Bureau of Assisted Living Staff (LFB Issue Paper #461)*. Adopt Alternative 2 to direct DHS to submit changes necessary to increase fees for assisted living facilities and outpatient mental health clinics to cover the cost of staffing DHS determines is necessary to ensure adequate protection of the health and well-being of vulnerable Wisconsinites. Direct the Department to submit a fee increase plan to JFC within six months of passage of the 2023-25 biennial budget act.

45. *Office of Caregiver Quality (LFB Issue Paper #462)*. Provide \$135,800 (\$54,300 FED and \$81,500 PR) in 2023-24 and \$168,000 (\$67,200 FED and \$100,800 PR) in 2024-25, to fund 2.0 (0.8 FED and 1.2 PR) four-year project positions in OCQ, beginning in 2023-24.

FoodShare and Public Assistance Administration

46. *FoodShare Employment and Training Program (LFB Issue Paper #465)*. Adopt Alternative 1 to provide \$7,046,200 (\$3,924,400 GPR and \$3,121,800 FED) in 2023-24 and \$5,420,200 (\$5,023,600 GPR and \$396,600 FED) in 2024-25 to fund costs of projected increases in the number of individuals who would participate in the FSET program in the 2023-25 biennium.

47. *MA and FoodShare Administration -- Contracts (LFB Issue Paper #466)*. Provide \$60,572,700 (\$21,497,000 GPR and \$39,075,700 FED) in 2023-24 and \$67,711,200 (\$24,499,500 GPR and \$43,211,700 FED) in 2024-25 to fund MA and Foodshare contracts in the 2023-25 biennium.

48. *Supplemental Ambulance Reimbursements (LFB Summary, Page 305, #9)*. Provide \$632,800 (\$316,400 GPR and \$316,400 FED) annually to contract for the administration of a certified public expenditure (CPE) program to increase MA reimbursement to ambulance service

providers owned by local governments.

49. *Income Maintenance -- Local Assistance (LFB Issue Paper #467)*. Adopt Alternative A1 and B2 to provide (a) \$756,800 (\$302,700 GPR and \$454,100 FED) in 2023-24 and \$1,528,500 (\$611,400 GPR and \$917,100 FED) in 2024-25 to increase base GPR funding for IM consortia and tribal agencies by 2% in 2023-24 and by an additional 2% in 2024- 25, and (b) \$1,000,000 (\$500,000 GPR and \$500,000 FED) annually to increase funding for local fraud prevention and investigations programs.

50. *Funeral and Cemetery Aids (LFB Summary, Page 306, #11)*. Reduce funding by \$396,800 GPR in 2023-24 and by \$152,800 GPR in 2024-25 to reflect reestimates of the cost of payments under the Wisconsin funeral and cemetery aids program (WFCAP).

Departmentwide

51. *Federal Revenue Reestimates (LFB Summary Page 315, #5)*. Provide \$60,315,500 FED annually to reflect the net effect of funding adjustments to certain appropriations funded from federal revenue.

52. *Program Revenue Reestimates (LFB Summary, Page 315, #6)*. Provide \$31,115,500 PR in 2023-24 and \$31,199,400 PR in 2024-25 to reflect the net effect of funding adjustments to certain appropriations funded from program revenue.

53. *Administrative Transfers (LFB Summary, Page 316, #7)*. Reduce PR funding by \$193,000 annually and increase FED funding by corresponding amounts, and convert 1.50 PR positions to FED positions, beginning in 2023-24, to reflect the net effect of position transfers that occurred within the Department in the 2021-23 biennium

54. *Delete Vacant Positions*. Delete 3.31 GPR vacant positions, 12.12 PR vacant positions, and 18.05 FED vacant positions, beginning in 2023-24 that have been vacant for more than 18 months.

Note:

[Change to Base: \$1,686,821,100 (\$310,572,000 GPR, \$917,932,300 FED, \$159,625,300 PR, and \$298,691,500 SEG), with -31.48 Positions (-59.78 GPR, -15.75 FED, 44.35 PR, -31.48 SEG), and GPR-Lapse of \$1,958,600 and \$2,900,000 GPR-Earned for 2023-24; \$1,414,146,500 (\$527,262,400 GPR, \$777,895,900 FED, \$130,576,300 PR, -\$21,588,100 SEG), with -31.48 (-62.11 GPR, -15.75 FED, 46.68 PR) Positions, and 3,000,000 GPR-Earned for 2024-25]

| | GPR | FED | PR | SEG | Total | GPR | FED | PR | SEG | Total |
|--|--------------|---------------|--------------|---------------|-----------------|---------------|---------------|--------------|---------------|---------------|
| MA-Eligibility and Benefits | | | | | | | | | | |
| MA Cost to Continue | 113,687,700 | \$618,648,900 | \$82,458,000 | \$298,691,500 | \$1,113,486,100 | \$240,502,500 | \$326,565,800 | \$38,064,300 | -\$21,588,100 | \$583,544,500 |
| Hospital Rate Increase | 8,741,200 | 13,975,100 | 0 | 0 | 22,716,300 | 17,859,500 | 27,573,000 | 0 | 0 | 45,432,500 |
| GME Supplement | 360,800 | 576,700 | 0 | 0 | 937,500 | 366,900 | 570,600 | 0 | 0 | 937,500 |
| Primary Care Reimb. Increase | 17,394,900 | 26,821,900 | 0 | 0 | 44,216,800 | 34,763,200 | 53,670,300 | 0 | 0 | 88,433,500 |
| Emergency MD Reimbursement | 1,969,700 | 3,149,000 | 0 | 0 | 5,118,700 | 4,024,300 | 6,213,000 | 0 | 0 | 10,237,300 |
| SeniorCare Reestimate | 6,605,100 | 1,828,800 | -2,944,400 | 0 | 5,489,500 | 5,477,800 | 4,167,200 | 7,313,800 | 0 | 16,958,800 |
| Chronic Disease Prog. Reestimate | -643,600 | 0 | -392,200 | 0 | -1,035,800 | -688,100 | 0 | -401,400 | 0 | -1,089,500 |
| Dis. Share Hospital Payment | 24,100,000 | 38,530,000 | 0 | 0 | 62,630,000 | 24,100,000 | 37,208,000 | 0 | 0 | 61,308,000 |
| Chiropractic Reimb. Parity | 200,000 | 400,000 | 0 | 0 | 600,000 | 500,000 | 700,000 | 0 | 0 | 1,200,000 |
| Critical Care Hospital Supplement | 2,250,000 | 3,597,000 | 0 | 0 | 5,847,000 | 2,250,000 | 3,474,000 | 0 | 0 | 5,724,000 |
| Behavioral Health Unit Reimb. | 4,000,000 | 6,168,000 | 0 | 0 | 10,168,000 | 8,000,000 | 12,351,000 | 0 | 0 | 20,351,000 |
| MA- Long Term Care | | | | | | | | | | |
| HCBS Rate Increase Cost to Cont. | \$17,194,500 | \$26,512,800 | \$0 | \$0 | \$43,707,300 | \$71,525,000 | \$110,426,800 | \$0 | \$0 | \$181,951,800 |
| Family Care Direct Care | 5,000,000 | 7,993,800 | 0 | 0 | 12,993,800 | 10,000,000 | 15,438,800 | 0 | 0 | 25,438,800 |
| Personal Care | 5,000,000 | 7,993,800 | 0 | 0 | 12,993,800 | 10,000,000 | 15,438,800 | 0 | 0 | 25,438,800 |
| Personal Needs Allowance | 0 | 0 | 0 | 0 | 0 | 806,100 | 1,253,900 | 0 | 0 | 2,060,000 |
| Nursing Home Support Services | 28,167,400 | 45,032,600 | 0 | 0 | 73,200,000 | 28,774,900 | 44,425,100 | 0 | 0 | 73,200,000 |
| Nursing Home Incentives | 6,002,900 | 9,597,100 | 0 | 0 | 15,600,000 | 6,132,400 | 9,467,600 | 0 | 0 | 15,600,000 |
| Nursing Home Vent. Dependent | 1,924,000 | 3,076,000 | 0 | 0 | 5,000,000 | 1,965,500 | 3,034,500 | 0 | 0 | 5,000,000 |
| MCO Reporting Requirement | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Elderly and Disability Services | | | | | | | | | | |
| ADRC | 2,513,700 | \$0 | \$0 | \$0 | \$2,513,700 | \$5,027,400 | \$0 | \$0 | \$0 | \$5,027,400 |
| Complex Patient Pilot | 5,000,000 | 0 | 0 | 0 | 5,000,000 | 0 | 0 | 0 | 0 | 0 |
| APS | 1,000,000 | 0 | 0 | 0 | 1,000,000 | 1,000,000 | 0 | 0 | 0 | 1,000,000 |
| WisCaregiver Careers | 0 | 0 | 0 | 0 | 0 | 2,000,000 | 0 | 0 | 0 | 2,000,000 |
| AFCSP | 250,000 | 0 | 0 | 0 | 250,000 | 250,000 | 0 | 0 | 0 | 250,000 |
| Home Delivered Meals | 225,000 | 0 | 0 | 0 | 225,000 | 225,000 | 0 | 0 | 0 | 225,000 |
| Public Health | | | | | | | | | | |
| Free and charitable clinic grant | \$750,000 | \$0 | \$0 | \$0 | \$750,000 | \$750,000 | \$0 | \$0 | \$0 | \$750,000 |
| Dental Residency | 5,000,000 | 0 | 0 | 0 | 5,000,000 | 0 | 0 | 0 | 0 | 0 |
| Surgical Collaborative of Wisconsin | 150,000 | 0 | 0 | 0 | 150,000 | 150,000 | 0 | 0 | 0 | 150,000 |
| Allied Health Professional Training | 2,500,000 | 0 | 0 | 0 | 2,500,000 | 2,500,000 | 0 | 0 | 0 | 2,500,000 |
| Operations Reduction | -76,700 | 0 | 0 | 0 | -76,700 | -76,700 | 0 | 0 | 0 | -76,700 |
| Behavioral Health | | | | | | | | | | |
| Crisis Urgent Care and Obs. Facilities | \$10,000,000 | \$0 | \$0 | \$0 | \$10,000,000 | \$0 | \$0 | \$0 | \$0 | \$0 |
| Mental Health Consultation Program | -266,700 | 0 | 0 | 0 | -266,700 | -266,700 | 0 | 0 | 0 | -266,700 |
| School Base MH Consultation Pilot | -175,000 | 0 | 0 | 0 | -175,000 | -175,000 | 0 | 0 | 0 | -175,000 |
| Telemedicine Crisis Response Pilot | 2,000,000 | 0 | 0 | 0 | 2,000,000 | 0 | 0 | 0 | 0 | 0 |

2023-24

2024-25

| | GPR | FED | PR | SEG | Total | GPR | FED | PR | SEG | Total |
|------------------------------------|---------------|---------------|---------------|---------------|-----------------|---------------|---------------|---------------|---------------|-----------------|
| Care and Treatment Services | | | | | | | | | | |
| Nonfood Supplies and Services | \$9,424,600 | \$0 | \$41,691,200 | \$0 | \$51,115,800 | \$12,618,400 | \$0 | \$46,189,200 | \$0 | \$58,807,600 |
| Resident Food Reestimate | 720,600 | 0 | 467,300 | 0 | 1,187,900 | 795,300 | 0 | 523,200 | 0 | 1,318,500 |
| Overtime Supplement | 6,152,800 | 0 | 777,500 | 0 | 6,930,300 | 6,152,800 | 0 | 777,500 | 0 | 6,930,300 |
| Mendota Juvenile Treatment Ctr. | 0 | 0 | 447,300 | 0 | 447,300 | 0 | 0 | 637,100 | 0 | 637,100 |
| Contracted Community Services | 3,411,900 | 0 | 0 | 0 | 3,411,900 | 5,432,300 | 0 | 0 | 0 | 5,432,300 |
| MHI Fund Source Reallocation | -6,116,600 | 0 | 6,116,600 | 0 | 0 | -6,365,400 | 0 | 6,365,400 | 0 | 0 |
| Fuel and Utilities | 10,100 | 0 | 0 | 0 | 10,100 | 86,900 | 0 | 0 | 0 | 86,900 |
| Quality Assurance | | | | | | | | | | |
| Office of Caregiver Quality | \$0 | \$54,300 | \$81,500 | \$0 | \$135,800 | \$0 | \$67,200 | \$100,800 | \$0 | \$168,000 |
| FoodShare and Admin. | | | | | | | | | | |
| FSET Cost to Continue | \$3,924,400 | \$3,121,800 | \$0 | \$0 | \$7,046,200 | \$5,023,600 | \$396,600 | \$0 | \$0 | \$5,420,200 |
| MA and FoodShare Admin- Contracts | 21,497,000 | 39,075,700 | 0 | 0 | 60,572,700 | 24,499,500 | 43,211,700 | 0 | 0 | 67,711,200 |
| Supp. Ambulance Reimbursement | 316,400 | 316,400 | 0 | 0 | 632,800 | 316,400 | 316,400 | 0 | 0 | 632,800 |
| Income Maint.- Local Assistance | 802,700 | 954,100 | 0 | 0 | 1,756,800 | 1,111,400 | 1,417,100 | 0 | 0 | 2,528,500 |
| Funeral and Cemetery Aids | -396,800 | 0 | 0 | 0 | -396,800 | -152,800 | 0 | 0 | 0 | -152,800 |
| Departmentwide | | | | | | | | | | |
| FED Re-estimates | \$0 | \$60,315,500 | \$0 | \$0 | \$60,315,500 | \$0 | \$60,315,500 | \$0 | \$0 | \$60,315,500 |
| PR Re-estimates | 0 | 0 | 31,115,500 | 0 | 31,115,500 | 0 | 0 | 31,199,400 | 0 | 31,199,400 |
| Admin. Transfers | 0 | 193,000 | -193,000 | 0 | 0 | 0 | 193,000 | -193,000 | 0 | 0 |
| Total | \$310,572,000 | \$917,932,300 | \$159,625,300 | \$298,691,500 | \$1,686,821,100 | \$527,262,400 | \$777,895,900 | \$130,576,300 | -\$21,588,100 | \$1,414,146,500 |