

Department of Health Services

	FY 2012 ACTUAL	FY 2013 ESTIMATE	FY 2014 BASELINE
OPERATING BUDGET			
<i>Full Time Equivalent Positions</i>	1,632.1	1,176.7	1,176.7
Personal Services	53,164,900	54,475,400	54,475,400
Employee Related Expenditures	22,566,800	22,874,700	22,874,700
Professional and Outside Services	12,138,500	14,038,500	14,038,500
Travel - In State	517,600	485,900	485,900
Travel - Out of State	65,900	67,900	67,900
Other Operating Expenditures	40,566,000	38,901,100	38,501,100
Equipment	1,873,600	1,308,700	1,308,700
OPERATING SUBTOTAL	130,893,300	132,152,200	131,752,200
SPECIAL LINE ITEMS			
Behavioral Health			
Medicaid Behavioral Health - Traditional	809,510,500	1,085,237,300	1,103,107,000
Medicaid Behavioral Health - Proposition 204	424,635,000	137,985,600	113,929,100
Proposition 204 Administration	5,283,000	6,446,700	6,446,700
Medicare Clawback Payments	12,541,500	13,838,800	14,925,100
Medicaid Special Exemption Payments	18,712,700	24,383,000	24,341,100
Non-Medicaid Seriously Mentally Ill Services	0	95,238,000	95,238,000
Non-Medicaid Prescription Medication	37,755,100	0	0
Supported Housing	5,215,500	5,324,800	5,324,800
Crisis Services	16,360,400	0	0
Community Placement Treatment	0	1,130,700	1,130,700
Public and Family Health			
Adult Cystic Fibrosis	78,900	105,200	105,200
AIDS Reporting and Surveillance	1,000,000	1,000,000	1,000,000
Alzheimer's Disease Research	1,125,000	1,125,000	1,125,000
Breast and Cervical Cancer and Bone Density Screening	960,100	1,346,700	1,346,700
County Tuberculosis Provider Care and Control	486,300	590,700	590,700
Emergency and Trauma Services	0	300,000	300,000
Folic Acid	362,200	400,000	400,000
High Risk Perinatal Services	2,077,600	2,543,400	2,543,400
Newborn Screening Program	4,948,500	6,260,700	6,260,700
Poison Control Centers Funding	666,300	990,000	990,000
Renal and Nonrenal Disease Management	198,000	198,000	198,000
AGENCY TOTAL	1,472,809,900^{1/}	1,516,596,800^{2/}	1,511,054,400

FUND SOURCES

General Fund	506,370,400	587,120,700	576,723,500
<u>Other Appropriated Funds</u>			
Arizona State Hospital Fund	9,476,200	12,507,400	12,507,400
ASH Land Earnings Fund	1,081,800	650,000	650,000
Capital Outlay Stabilization Fund	1,244,800	1,146,500	1,146,500
Child Fatality Review Fund	94,800	93,400	93,400
Emergency Medical Services Operating Fund	4,188,700	5,044,100	5,044,100
Environmental Laboratory Licensure Revolving Fund	749,500	910,800	910,800
Federal Child Care and Development Fund Block Grant	834,800	829,400	829,400
Health Services Licensing Fund	7,983,200	7,904,300	7,904,300
Hearing and Speech Professionals Fund	316,600	309,900	309,900
Indirect Cost Fund	7,292,500	8,886,700	8,886,700
Long Term Care System Fund	0	1,379,600	1,379,600
Newborn Screening Program Fund	4,948,500	6,692,600	6,692,600
Nursing Care Institution Resident Protection Fund	144,400	438,100	38,100

	FY 2012 ACTUAL	FY 2013 ESTIMATE	FY 2014 BASELINE
Prescription Drug Rebate Fund	33,900,000	0	0
Substance Abuse Services Fund	2,250,000	2,250,000	2,250,000
TTHCF Health Research Account	1,000,000	1,000,000	1,000,000
TTHCF Medically Needy Account	35,129,200	35,167,000	35,167,000
Vital Records Electronic Systems Fund	2,019,500	3,607,500	3,607,500
SUBTOTAL - Other Appropriated Funds	112,654,500	88,817,300	88,417,300
SUBTOTAL - Appropriated Funds	619,024,900	675,938,000	665,140,800
Expenditure Authority Funds			
Federal Medicaid Services	853,785,000	840,658,800	845,913,600
SUBTOTAL - Expenditure Authority Funds	853,785,000	840,658,800	845,913,600
SUBTOTAL – Appropriated/Expenditure Authority Funds	1,472,809,900	1,516,596,800	1,511,054,400
Other Non-Appropriated Funds	109,305,400	113,030,400	113,030,400
Federal Funds	306,362,800	314,980,400	314,980,400
TOTAL - ALL SOURCES	1,888,478,100	1,944,607,600	1,939,065,200

AGENCY DESCRIPTION — The Department of Health Services (DHS) is responsible for the provision of most public health programs not administered by AHCCCS, most behavioral health programs, the Arizona State Hospital (ASH), emergency medical services, state laboratory support, vital records maintenance, disease control, and epidemiological monitoring.

Summary

DHS' FY 2014 General Fund spending would decrease by \$(10,397,200), or (1.8)%. The Baseline includes:

- \$(26,262,800) for formula adjustments.
- \$15,865,600 for mandatory costs associated with federal health care legislation.

Operating Budget

The Baseline includes \$131,752,200 and 1,151.6 FTE Positions in FY 2014 for the operating budget. These amounts consist of:

	FY 2014
General Fund	\$77,731,700
Arizona State Hospital Fund	11,376,700
ASH Land Earnings Fund	650,000
Capital Outlay Stabilization Fund	1,146,500
Child Fatality Review Fund	93,400
Emergency Medical Services (EMS) Operating Fund	4,594,100
Environmental Laboratory Licensure Revolving Fund	910,800
Federal Child Care and Development Fund (CCDF) Block Grant	829,400
Health Services Licensing Fund	7,904,300

Hearing and Speech Professionals Fund	309,900
Indirect Cost Fund	8,886,700
Long-Term Care System Fund	1,379,600
Newborn Screening Program Fund	431,900
Nursing Care Institution Resident Protection Revolving Fund	38,100
Vital Records Electronic Systems Fund	3,607,500
Federal Medicaid Authority (FMA)	11,861,600

FY 2014 adjustments would be as follows:

Quality Improvement Study OF (400,000)
The Baseline includes a decrease of \$(400,000) from the Nursing Care Institution Resident Protection Revolving Fund in FY 2014 to reduce funding for a one-time quality improvement study of nursing care facilities.

Behavioral Health

These line items fund 3 types of services; 1) Serious Mental Illness (SMI), 2) Children's Behavioral Health (CBH) and 3) General Mental Health and Substance Abuse (GMH/SA). (See Table 1 for more information.)

Formula Adjustments

The Baseline includes formula adjustments that are comprised of changes to capitation rates, caseloads, mandatory changes from federal health care legislation and

^{1/} Includes a total of \$1,448,400 GF, \$775,000 OF, and \$103,100 FMA appropriated in FY 2012 for costs associated with an additional pay period. These expenditures were not reflected in the individual agency tables in the FY 2012 Appropriations Report.

^{2/} In addition to these amounts, the FY 2013 General Appropriation Act included one-time FY 2013 adjustments for a state employee health insurance premiums holiday and employee retention payments. The adjustments include a reduction of \$(649,700) GF for the premium holiday and an increase of \$988,700 GF and \$378,000 for the employee retention payment.

Table 1

General Fund Medicaid Behavioral Health Appropriations

	FY 2013	FY 2013	FY 2014	FY 2014 Above
	<u>Appropriated</u>	<u>Revised</u>	<u>FY 2014</u>	<u>FY 2013</u>
				<u>Revised</u>
Medicare Clawback Payments	\$ 13,838,800	\$ 13,858,000	\$ 14,925,100	\$ 1,067,100
Medicaid Special Exemption Payments	8,269,500	7,897,900	8,071,500	173,600
<u>State Match for Medicaid ^{1/}</u>				
CBH	144,232,600	144,791,400	154,022,100	9,230,700
SMI	175,913,000	160,544,700	160,185,900	(358,800)
GMH/SA	47,911,300	48,650,200	51,582,100	2,931,900
<u>State Match for Proposition 204</u>				
CBH	1,652,800	1,652,200	1,765,700	113,500
GMH/SA	<u>45,144,800</u>	<u>39,255,500</u>	<u>36,013,200</u>	<u>(3,242,300)</u>
Total	\$436,962,800	\$416,649,900	\$426,565,600	\$ 9,915,700

^{1/} Base amounts include \$34,767,000 from the Medically Needy Account of the Tobacco Tax and Health Care Fund.

changes to the Federal Medical Assistance Percentage (FMAP).

Capitation rate inflation is assumed to be 2% above FY 2013 for all Medicaid Behavioral Health programs. Recent budgets have not included a capitation rate increase. The 2% capitation rate increase is estimated to cost the General Fund \$7,937,300 in FY 2014. Adjustments to Medicare Clawback payments will cost the General Fund an additional \$1,086,300.

Aside from caseload growth due to federal health care legislation, DHS caseloads are expected to decline by (3,255) from June 2013 to June 2014. This net decrease consists of 2 different components. Prior to mandatory federal health care changes described below, the Traditional population is expected to grow by 3%. This increase is offset by a freeze of enrollment for the Childless Adults population, which is projected to result in a Proposition 204 decrease of (3.3)%. As a result of the freeze on enrollment of Childless Adults, FY 2013 caseloads are expected to be lower than budgeted. The lower than projected FY 2013 caseload growth, coupled with the decline in FY 2014 caseloads, is expected to produce a General Fund savings of \$(20,618,000) relative to the FY 2013 budget.

The FMAP is the rate at which the federal government matches state contributions to the Medicaid programs. These rates are set on a state-by-state basis and are revised each year. Typically the federal government provides an approximate 2:1 match for most Medicaid services. During FY 2014, the FMAP for Medicaid will increase to 66.84% (0.75% increase). The formula adjustments include a decrease of \$(14,668,400) in General Fund spending to offset the federal rate increase.

Mandatory Federal Health Care Changes

Mandatory changes involved with federal health care legislation passed in 2010, known as the Affordable Care Act, will result in additional costs to various Medicaid programs of which DHS is a participant, resulting in an additional General Fund cost of \$15,865,600. (Please see

Mandatory Changes Resulting from Federal Health Care legislation in the AHCCCS section of this report.)

Optional Eligibility Expansion

The United States Supreme Court's ruling on the Affordable Care Act (ACA) made the expansion of Medicaid eligibility for adults optional. If a state chooses to expand, the federal government will pay 100% of the cost of expansion of Medicaid eligibility from 100% to 133% of the Federal Poverty Level (FPL). The FY 2014 expansion of Medicaid eligibility would cost the General Fund \$13 million, if the state chooses to expand Medicaid coverage for childless adults up to 100% of FPL at the regular Medicaid match rate. If the state chooses to expand Medicaid to cover all adults up to 133% of FPL, the state will receive an enhanced match rate, resulting in a General Fund increase of \$1 million. However, FY 2015 expansion costs would increase under either option as the ACA would be fully implemented. (Please see *Optional Eligibility Expansion in the AHCCCS section for additional information.*)

Medicaid Behavioral Health - Traditional

The Baseline includes \$1,103,107,000 in FY 2014 for Medicaid Behavioral Health - Traditional. This amount consists of:

General Fund	331,023,100
Tobacco Tax and Health Care Fund	34,767,000
Medically Needy Account	
Federal Medicaid Authority	737,316,900

FY 2014 adjustments would be as follows:

Formula Growth	GF	(2,266,800)
	FMA	20,136,500

The formula adjustments include 3% enrollment growth after the continuation of the FY 2013 caseload savings, an increase to the federal match rate, and a 2% capitation increase.

This line item provides behavioral health treatment to Medicaid eligible children and adults. In June 2014, there would be approximately 1,138,259 eligible individuals. DHS receives a monthly capitation payment from AHCCCS for every individual eligible for Medicaid behavioral health services, although only an estimated average 10.66%, or 121,338, of the eligible population will utilize services.

Medicaid Behavioral Health - Proposition 204

The Baseline includes \$113,929,100 in FY 2014 for Medicaid Behavioral Health - Proposition 204. This amount consists of:

General Fund	37,778,900
Federal Medicaid Authority	76,150,200

FY 2014 adjustments would be as follows:

Formula Growth	GF (9,018,700)
	FMA (15,037,800)

The formula adjustments include (3.3)% enrollment decline after the continuation of the FY 2013 caseload savings, an increase to the federal match rate, and a 2% capitation increase.

This line item provides behavioral health treatment to Medicaid eligible children and adults. In June 2014, there would be 205,728 eligible individuals. DHS receives a monthly capitation payment from AHCCCS for every individual eligible for Medicaid behavioral health services, although only an estimated average 10.66%, or 21,931, of the eligible population will utilize services.

Proposition 204 Administration

The Baseline includes \$6,446,700 in FY 2014 for Proposition 204 Administration. This amount consists of:

General Fund	2,131,400
Federal Medicaid Authority	4,315,300

These amounts are unchanged from FY 2013.

This line item provides funding for the administrative component of the Proposition 204 population.

Medicare Clawback Payments

The Baseline includes \$14,925,100 from the General Fund in FY 2014 for Medicare Clawback Payments. FY 2014 adjustments would be as follows:

Formula Growth	GF 1,086,300
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As part of the Medicare Modernization Act (MMA) effective January 1, 2006, DHS is not required to pay for prescription drug costs for members who are also eligible

for Medicare. Instead, DHS is required to make "Clawback" payments to Medicare based on 76.7% of the estimated prescription drug cost of this population in 2014. The state's share of 76.7% declines annually by 1.7% and the Clawback cost per member is annually increased based on national health trend information.

Medicaid Special Exemption Payments

The Baseline includes \$24,341,100 in FY 2014 for Medicaid Special Exemption Payments. This amount consists of:

General Fund	8,071,500
Federal Medicaid Authority	16,269,600

FY 2014 adjustments would be as follows:

Formula Growth	GF (198,000)
	FMA 156,100

This line item provides funding necessary for insurance premium tax payments by DHS. The department is required to pay a 2% tax on the capitation payments it pays to Regional Behavioral Health Authorities.

Non-Medicaid Seriously Mentally Ill Services

The Baseline includes \$95,238,000 in FY 2014 for Non-Medicaid Seriously Mentally Ill (SMI) Services Special Line Item (SLI). This amount consists of:

General Fund	92,988,000
Tobacco Tax and Health Care Fund	2,250,000
Medically Needy Account	

These amounts are unchanged from FY 2013.

Background – This line item provides funding for a benefit package for Non-Medicaid Seriously Mentally Ill clients. The state has been a longstanding defendant in the *Arnold v. Sarn* litigation concerning the level of services provided to the SMI population. Due to the state's fiscal condition, the plaintiffs and the state agreed in March 2010 to suspend the lawsuit for 2 years due to lack of funding. As part of the suspension, the FY 2011 budget reduced Non-Medicaid behavioral health spending by \$(41,754,000). The FY 2013 budget restored the majority of this reduction. In accordance with the May 2012 agreement to end the suspension, the state has agreed to utilize the restored funding to provide *Arnold* class members with access to name-brand prescription medication, additional crisis services, and expanded support services. Additionally, the agreement requires that the amount of class members receiving treatment at the Arizona State Hospital is capped at 55, in order to encourage greater use of community-based treatment and living arrangements. (Please see *Other Issues for Legislative Consideration*.)

Supported Housing

The Baseline includes \$5,324,800 from the General Fund in FY 2014 for Supported Housing. This amount is unchanged from FY 2013.

This line item funds housing services that will enable individuals to live in the community. These funds may serve Medicaid and 100% state funded recipients. Medicaid, however, does not provide a match for housing assistance.

Community Placement Treatment

The Baseline includes \$1,130,700 from the ASH Fund in FY 2014 for Community Placement Treatment. This amount is unchanged from FY 2013.

This line item provides funding for housing, transportation, clinical support, and meaningful day activities for State Hospital patients treated in the community.

The Baseline includes approximately \$66,000,000 for inpatient hospitalization services at the State Hospital for the seriously mentally ill. As of September 2012, the ASH census was 229 patients.

Public and Family Health

Adult Cystic Fibrosis

The Baseline includes \$105,200 from the General Fund in FY 2014 for Adult Cystic Fibrosis. This amount is unchanged from FY 2013.

This line item provides contracted care and treatment services through Phoenix Children's Hospital for 20 individuals with cystic fibrosis.

AIDS Reporting and Surveillance

The Baseline includes \$1,000,000 from the General Fund in FY 2014 for AIDS Reporting and Surveillance. This amount is unchanged from FY 2013.

The line item provides \$125,000 for a database system administered by Maricopa and Pima Counties to track the incidence of Acquired Immune Deficiency Syndrome (AIDS) and AIDS-related conditions. The program also receives \$875,000 to provide medications under the Arizona AIDS Drug Assistance Program, which also receives Federal Funds for the medications. The program served an average of 1,300 clients per month in FY 2012.

Alzheimer's Disease Research

The Baseline includes \$1,125,000 in FY 2014 for Alzheimer's Disease Research. This amount consists of:

General Fund	125,000
TTHCF Health Research Account	1,000,000

These amounts are unchanged from FY 2013.

This line item provides funding for grants to universities, hospitals, and research centers in Arizona for dollar-for-dollar matching grants for research on the causes of Alzheimer's disease.

Breast and Cervical Cancer and Bone Density Screening

The Baseline includes \$1,346,700 and 1 FTE Position from the General Fund in FY 2014 for Breast and Cervical Cancer and Bone Density Screening. These amounts are unchanged from FY 2013.

The Well Woman Healthcheck program contracts for cancer screening women over age 40 that do not have health insurance and have incomes less than 250% of the Federal Poverty Level. Women who are diagnosed with breast and cervical cancer through this program are eligible to receive treatment through AHCCCS.

County Tuberculosis Provider Care and Control

The Baseline includes \$590,700 from the General Fund in FY 2014 for County Tuberculosis Provider Care and Control. This amount is unchanged from FY 2013.

This line item provides General Fund reimbursement to hospitals and physicians for the care of hospitalized tuberculosis patients and for assistance to all county health departments for local tuberculosis control programs.

Emergency and Trauma Services

The Baseline includes \$300,000 from the General Fund in FY 2014 to provide additional funding for the purpose of maintaining essential emergency department and Level IV trauma services. A hospital must be located in a county with a population of less than 500,000 persons; be licensed to operate 25 or fewer beds; not be designated as a critical access hospital as of January 1, 2012, pursuant to U.S. Code 42 § 485, F; and located within 25 miles of a hospital operated by the Indian Health Service. La Paz Regional Hospital meets these criteria. This amount is unchanged from FY 2013.

Folic Acid

The Baseline includes \$400,000 from the Medically Needy Account of the Tobacco Tax and Health Care Fund in FY

2014 for Folic Acid. This amount is unchanged from FY 2013.

This line item provides for the distribution of folic acid to women of child bearing age to help prevent birth defects. In FY 2012, 38,328 low-income women of childbearing age received multivitamins and 14,452 women received folic acid education and multivitamins.

High Risk Perinatal Services

The Baseline includes \$2,543,400 in FY 2014 for High Risk Perinatal Services. This amount consists of:

General Fund	2,093,400
Emergency Medical Services Operating Fund	450,000

These amounts are unchanged from FY 2013.

This line item provides contracted transport services for high risk expectant mothers and contracted physician follow-up services for uninsured newborns in intensive care centers. It also provides funding for 4 visits per year to families who have babies born at risk of having developmental problems (i.e. speech problems, poor motor skills, delay in walking, etc.). The purpose of the visits is to have children developmentally ready to enter school by age 5.

Newborn Screening Program

The Baseline includes \$6,260,700 and 24.1 FTE Positions from the Newborn Screening Program Fund in FY 2014 for the Newborn Screening Program. These amounts are unchanged from FY 2013.

This line item funds the centralized testing of all newborns in the state for a standard set of 29 disorders. In FY 2013, the program provided screening for approximately 87,590 newborns. The program also provides for follow-up counseling for the parents of affected newborns. The State Health Laboratory is the designated laboratory for testing.

Poison Control Centers Funding

The Baseline includes \$990,000 from the General Fund in FY 2014 for Poison Control Centers. This amount is unchanged from FY 2013.

A.R.S. § 36-1161 requires 2 poison control centers to be maintained in Arizona. DHS allocated \$647,300 to the University of Arizona Poison Information Center and \$342,700 to the Banner Poison Control Center in FY 2013.

Laws 2012, Chapter 317 allows the Board of Pharmacy to transfer up to \$1,000,000 from the Arizona State Board of Pharmacy Fund to the University of Arizona Poison Control Information Center. However, this amount is not reflected in the table at the beginning of this narrative.

Renal and Nonrenal Disease Management

The Baseline includes \$198,000 from the General Fund in FY 2014 for Renal and Nonrenal Disease Management. This amount is unchanged from FY 2013.

This line item provides funding for medication and other transplant-related services for renal and nonrenal transplant patients who are ineligible for other public assistance programs.

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FORMAT — Operating Lump Sum with Special Line Items by Agency

FOOTNOTES

Standard Footnotes

Departmentwide

A monthly report comparing total expenditures for the month and year-to-date as compared to prior year totals shall be forwarded electronically to the President of the Senate, the Speaker of the House of Representatives, the Chairpersons of the Senate and House of Representatives Appropriations Committees, and the Director of the Joint Legislative Budget Committee by the 30th of the following month. The report shall include an estimate of potential shortfalls in programs, potential Federal and Other Funds, such as the statewide assessment for indirect costs that may be available to offset these shortfalls, and a plan, if necessary, for eliminating any shortfall without a supplemental appropriation, and total expenditure authority of the month and year-to-date for federally-matched services.

On or before January 6, 2014, the Arizona Health Care Cost Containment System administration and the Department of Health Services shall report to the Director of the Joint Legislative Budget Committee the total amount of Medicaid reconciliation payments and penalties received by that date since July 1, 2013. On June 30, 2014, the administration and department shall report the same information for all of FY 2014.

Behavioral Health

It is the intent of the Legislature that the percent attributable to administration/profit for the Regional Behavioral Health Authority in Maricopa County is 9% of the overall capitation rate.

The Department of Health Services shall report to the Joint Legislative Budget Committee 30 days after the end of each calendar quarter on the progress the department is making toward settling the *Arnold v. Sam* lawsuit. The report shall include at a minimum the department's progress towards meeting the exit criteria and whether the department is in compliance with the exit criteria schedule.

The amounts included in the Proposition 204 Administration and Medicaid Behavioral Health - Proposition 204 Special Line Items include all available sources of funding consistent with A.R.S. § 36-2901.01B.

In addition to the appropriation for the Department of Health Services, earnings on state lands and interest on the investment of the Permanent Land Funds are appropriated to the State Hospital in compliance with the Enabling Act and the Constitution of Arizona.

The department shall report to the Joint Legislative Budget Committee by March 1 of each year on preliminary actuarial estimates of the capitation rate changes for the following fiscal year along with the reasons for the estimated changes. For any actuarial estimates that include a range, the total range from minimum to maximum shall be no more than 2%. Before implementation of any changes in capitation rates for any behavioral health line items, the Department of Health Services shall report its expenditure plan for review by the Joint Legislative Budget Committee. Before the department implements any changes in policy affecting the amount, sufficiency, duration and scope of health care services and who may provide services, the department shall prepare a fiscal impact analysis on the potential effects of this change on the following year's capitation rates. If the fiscal analysis demonstrates that these changes will result in additional state costs of \$500,000 or greater for a given fiscal year, the department shall submit the policy changes for review by the Joint Legislative Budget Committee.

Public and Family Health

The Department of Health Services may use up to 4% of the amounts appropriated for Renal and Nonrenal Disease Management for the administrative costs to implement the program.

Of the \$1,125,000 for Alzheimer's Disease Research, \$1,000,000 of that amount is from the Tobacco Tax and Health Care Fund - Health Research Account.

Deleted Footnotes

The Baseline would delete the footnote allowing the department to use IGA and ISA monies as the state Medicaid match for behavioral health services.

STATUTORY CHANGES

The Baseline would:

- As session law, continue requiring all cities and counties to pay 100% of their Restoration to Competency costs.
- As session law, continue requiring all counties to pay 50% of their Sexually Violent Persons costs.
- As session law, continue to notwithstanding A.R.S. § 36-773 to permit DHS to use Tobacco Tax and Health Care Fund - Health Research Account monies for Alzheimer's disease research.

OTHER ISSUES FOR LEGISLATIVE CONSIDERATION

FY 2013 Caseload and Capitation Adjustments

The FY 2013 budget includes \$423,124,000 from the General Fund for Medicaid capitation payments. DHS' actual capitation rates were (0.9)% lower than budgeted. Additionally, the ongoing Childless Adult freeze is estimated to result in a decline of (17.6)% in the Medicaid Behavioral Health - Proposition 204 population. These 2 factors are estimated to produce a General Fund savings of \$(20,332,100) in FY 2013, as reflected in *Table 1*. The savings are reflected as part of the statewide FY 2013 reversion estimate. Reversions represent unspent appropriations.

Non-Medicaid Behavioral Health Services Funding

The FY 2014 Baseline includes \$100,562,800 for Non-Medicaid behavioral health services, which are funded in the Non-Medicaid Seriously Mentally Ill Services Special Line Item (SLI) and the Supported Housing SLI. This is the same funding level as in FY 2013. When compared with the original FY 2009 appropriation for Non-Medicaid behavioral health services, the FY 2014 Baseline amount represents a reduction of \$(22,839,000). *Table 2* on the following page summarizes Non-Medicaid behavioral health funding totals and changes to funding in SLIs from FY 2009 to FY 2013. The FY 2011 budget consolidated Non-Medicaid behavioral health services into 3 SLIs. The FY 2013 budget further consolidated the Non-Medicaid behavioral health services SLIs to reflect additional monies that were added as part of the agreement to settle the *Arnold v. Sarn* lawsuit.

Table 2

Non-Medicaid Behavioral Health Appropriations

Program	FY 2009	FY 2010	FY 2011	FY 2012	FY 2013	FY 2013 Change from FY 2009
CBH	\$ 8,851,800	\$ 7,320,700	\$ -	\$ -	\$ -	\$ (8,851,800)
SMI	61,116,700	53,849,700	0	0	0	(61,116,700)
Court Monitor	197,500	197,500	0	0	0	(197,500)
Arnold v. Sarn	37,153,100	34,170,200	0	0	0	(37,153,100)
Mental Health	2,447,300	1,747,300	0	0	0	(2,447,300)
Substance Abuse	13,635,400	6,339,400	0	0	0	(13,635,400)
Prescription Medication	0	0	40,154,900	40,154,900	0	0
Supported Housing	0	0	5,324,800	5,324,800	5,324,800	5,324,800
Crisis Services	0	0	16,391,100	16,391,100	0	0
Non-Medicaid SMI Services	0	0	0	0	95,238,000	95,238,000
Total	\$ 123,401,800	\$ 103,624,800	\$ 61,870,800	\$ 61,870,800	\$ 100,562,800	\$ (22,839,000)

SUMMARY OF FUNDS	FY 2012 Actual	FY 2013 Estimate
Addiction Reduction and Recovery Fund (HSA2523/A.R.S. § 36-2007)		Non-Appropriated
Source of Revenue: FY 2007 appropriation of \$2,500,000 from the General Fund and any federal monies and private grants, gifts, and contributions to assist in carrying out the purposes of this fund.		
Purpose of Fund: For substance abuse and addiction prevention programs including methamphetamine abuse and addiction prevention programs.		
Funds Expended	100	0
Year-End Fund Balance	0	0
Arizona State Hospital Fund (HSA3120/A.R.S. § 36-545.08)		Appropriated
Source of Revenue: State monies and matching federal monies for disproportionate share payments at the Arizona State Hospital, Medicaid reimbursement for services provided at the Arizona State Hospital, and monies collected for services to clients at the state hospital. The FY 2013 Health Budget Reconciliation Bill (BRB) (Laws 2012, Chapter 299) continues an FY 2012 session law that requires that all counties pay 100% of the cost of care for Restoration to Competency patients.		
Purpose of Fund: To provide treatment of patients at the Arizona State Hospital or to place Arizona State Hospital patients in the community.		
Funds Expended	9,476,200	12,507,400
Year-End Fund Balance	3,192,300	0
Arizona State Hospital Land Earnings Fund (HSA3128/A.R.S. § 36-211)		Appropriated
Source of Revenue: Monies received from interest on the Arizona State Hospital's Permanent Land Fund, as established through Arizona's Enabling Act, Section 25, and the monies derived from the lease of these lands and miscellaneous revenue.		
Purpose of Fund: For the benefit and support of the Arizona State Hospital.		
Funds Expended	1,081,800	650,000
Year-End Fund Balance	877,900	717,900
Breast and Cervical Cancer Screening and Diagnostic Special Plate Fund (HSA2513/A.R.S. § 36-119)		Non-Appropriated
Source of Revenue: Revenues from special plate fees and renewals. Of the \$25 fee, \$8 is for administrative costs deposited to the State Highway Fund and \$17 is deposited into the Breast and Cervical Cancer Screening and Diagnostic Special Plate Fund.		
Purpose of Fund: For breast and cervical cancer screening and diagnostic and outreach services.		
Funds Expended	335,600	180,000
Year-End Fund Balance	270,600	290,600
Capital Outlay Stabilization Fund (HSA1600/A.R.S. § 41-792.01)		Appropriated
Source of Revenue: Appropriations from the Arizona Department of Administration Capital Outlay Stabilization Fund and transfers from the Arizona Department of Administration (<i>See Arizona Department of Administration for more detail on Capital Outlay Stabilization Fund</i>).		
Purpose of Fund: Lease-purchase payments for the new state health laboratory (transfers from Arizona Department of Administration are spent for building renewal).		
Funds Expended	1,244,800	1,146,500
Year-End Fund Balance	0	0
Child Fatality Review Fund (HSA3036/A.R.S. § 36-3504)		Appropriated
Source of Revenue: A \$1 surcharge on fees collected on all certified copies of death certificates, up to \$100,000. Any revenue collected in excess of \$100,000 is transferred from the fund to the Child Abuse Prevention Fund in the Department of Economic Security.		
Purpose of Fund: To organize county child fatality review teams and to study data collected by these teams to determine ways to reduce the state's child mortality rate.		
Funds Expended	94,800	93,400
Year-End Fund Balance	592,800	421,100

SUMMARY OF FUNDS	FY 2012 Actual	FY 2013 Estimate
Childhood Cancer and Rare Childhood Disease Research Fund (No Fund Number/A.R.S. § 28-2442, A.R.S. § 36-121)		Non-Appropriated
Source of Revenue: A deposit of \$17 of each \$25 original and annual renewal of Childhood Cancer Research special plate fee and interest earnings. The remaining \$8 is deposited to the State Highway Fund for special plate administration.		
Purpose of Fund: To issue Multiple Sclerosis special plates, if a person or entity pays \$32,000 by December 31, 2012. The first \$32,000 received shall be reimbursed to the person or entity that paid the implementation fee to ADOT. The person or entity that provides the \$32,000 shall design the Childhood Cancer Research special plates, subject to approval by ADOT. ADOT is to annually deposit these monies, excluding administrative fees, into the DHS-administered Childhood Cancer and Rare Childhood Disease Research Fund. DHS shall allocate monies from the fund to nonprofit health care providers and research institutions throughout the state for Phase I clinical trials relating to pediatric cancer or other rare pediatric diseases.		
Funds Expended	0	0
Year-End Fund Balance	0	0
Disease Control Research Fund (HSA2090/A.R.S. § 36-274)		Non-Appropriated
Source of Revenue: Monies appropriated by the Legislature and any gifts, contributions or other monies received by the Disease Control Research Commission from any other source, including Proposition 204.		
Purpose of Fund: To be used for projects or services that may advance research in the causes, epidemiology and prevention of disease, including discovery and development. This fund was previously part of the Arizona Biomedical Research Commission (ABRC) budget. The FY 2012 Consolidation BRB (Laws 2011, Chapter 27) transferred the fund from within ABRC to DHS.		
Funds Expended	2,200,500	2,427,000
Year-End Fund Balance	10,992,800	11,119,800
Donations - DHS (HSA3010/2025/A.R.S. § 36-132)		Non-Appropriated
Source of Revenue: Individual donations for various health related purposes.		
Purpose of Fund: For specific purposes as designated by the donors. Monies donated pursuant to A.R.S. § 36-213 and A.R.S. § 36-204 for the Arizona State Hospital are accounted for separately.		
Funds Expended	222,300	224,100
Year-End Fund Balance	740,500	732,400
Donations - Statewide (HSA2025/A.R.S. § 36-132)		Non-Appropriated
Source of Revenue: Individual donations from employee recognition events.		
Purpose of Fund: Employee recognition purposes.		
Funds Expended	5,800	2,800
Year-End Fund Balance	4,600	7,300
Emergency Medical Services Operating Fund (HSA2171/A.R.S. § 36-2218)		Appropriated
Source of Revenue: The fund receives 48.9% of the Medical Services Enhancement Fund revenues, which are collected from a 13% surcharge on fines charged for criminal offenses and civil motor vehicle statute violations.		
Purpose of Fund: To fund local and state emergency medical services systems.		
Funds Expended	4,188,700	5,044,100
Year-End Fund Balance	2,516,100	1,542,300
Environmental Laboratory Licensure Revolving Fund (HSA3017/A.R.S. § 36-495.15)		Appropriated
Source of Revenue: Fees collected for environmental lab licensure, fees derived from department-sponsored workshops, and monies from gifts, grants, and donations.		
Purpose of Fund: For costs associated with licensing environmental laboratories by the Department of Health Services.		
Funds Expended	749,500	910,800
Year-End Fund Balance	535,700	396,200

SUMMARY OF FUNDS	FY 2012 Actual	FY 2013 Estimate
Federal Child Care and Development Fund Block Grant (HSA2008/U.S. P.L 104-193)		Appropriated
Source of Revenue: Federal formula grant.		
Purpose of Fund: A portion of the Federal Child Care and Development Block Grant provides the Assurance and Licensure Division with monies for the licensure of child care facilities.		
Funds Expended	834,800	829,400
Year-End Fund Balance	64,600	64,600
Federal Grants (HSA2000/A.R.S. § 35-142)		Non-Appropriated
Source of Revenue: Grants and reimbursements from the federal government. Federal reimbursement for the Medicaid program is not included in this fund and can be found listed in the Medicaid Services and County Contributions Fund.		
Purpose of Fund: To provide health services in accordance with the terms of each specific grant.		
Funds Expended	302,519,800	313,641,100
Year-End Fund Balance*	(2,552,400)	(5,847,900)
Federal Grants - American Recovery and Reinvestment Act (ARRA) (HSA2999/A.R.S. § 35-142)		Non-Appropriated
Source of Revenue: One-time Federal Funds allocated by the American Recovery and Reinvestment Act of 2009 (P.L. 111-5).		
Purpose of Fund: One-time Federal Funds to be used by the department for Public Health and Family Health programs.		
Funds Expended	3,843,000	1,339,300
Year-End Fund Balance*	(600)	(600)
Federal Medicaid Services (HSA2500/A.R.S. § 35-142)		Non-Appropriated
Source of Revenue: The fund receives federal match dollars for treating behavioral health problems in Medicaid-eligible persons.		
Purpose of Fund: For accounting purposes, these monies are considered part of the Agreements/IGA Fund. However, for informational purposes, the revenues and expenditures related to behavioral health have been separated from the Agreements Fund.		
Funds Expended	853,785,000	840,658,800
Year-End Fund Balance	0	0
Health Services Licensing Fund (HSA1995/A.R.S. § 36-405, A.R.S. § 36-414)		Appropriated
Source of Revenue: Nonrefundable fees for health care institution licensing services.		
Purpose of Fund: For health care institutions' licensing applications, initial license, renewal license and architectural drawing reviews. DHS establishes nonrefundable fees for assurance and licensure. 90% of assurance and licensure fees have been deposited into this fund with the remaining 10% deposited into the General Fund.		
Funds Expended	7,983,200	7,904,300
Year-End Fund Balance	1,759,600	2,316,500
Hearing and Speech Professionals Fund (HSA3041/A.R.S. § 36-1903)		Appropriated
Source of Revenue: Monies collected by DHS from the examination and licensing of hearing and speech professionals.		
Purpose of Fund: For the licensing and regulation of hearing and speech professionals.		
Funds Expended	316,600	309,900
Year-End Fund Balance	494,400	688,200

SUMMARY OF FUNDS	FY 2012 Actual	FY 2013 Estimate
IGA/County Contributions (HSA2144/2500/A.R.S. § 35-142)		Non-Appropriated
Source of Revenue: This fund receives revenues from intergovernmental agreements between DHS and other state and local entities, contributions from Maricopa and Pima Counties for treating persons with behavioral health problems, subaccounts for Liquor Services Fees authorized under A.R.S. § 4-203-02, and deposits from the State Lottery Fund pursuant to A.R.S. § 5-522. In FY 2013, DHS will receive \$51,452,000 from Maricopa and Pima County for behavioral health services, \$3,357,000 from the Arizona Health Care Cost Containment System (AHCCCS) for KidsCare, and \$14,287,900 from the Department of Economic Security for nutrition services. The department will also receive \$6,800,000 from the State Lottery Fund for teenage pregnancy prevention, Health Start, and the Women, Infants, and Children (WIC) program.		
Purpose of Fund: To fund services which DHS has agreed to perform at the request of, or in conjunction with, public agencies.		
Funds Expended	77,319,400	77,257,200
Year-End Fund Balance	74,614,700	76,042,400
Indirect Cost Fund (HSA9001/A.R.S. § 36-108)		Appropriated
Source of Revenue: Charges made to Federal Funds and interagency agreements in order to reimburse the agency for a portion of the administrative costs of the programs.		
Purpose of Fund: To pay a portion of the administrative personnel and overhead costs associated with various federal programs and interagency agreements.		
Funds Expended	7,292,500	8,886,700
Year-End Fund Balance	2,224,800	2,537,500
Internal Services Fund (HSA4202/A.R.S. § 36-108)		Non-Appropriated
Source of Revenue: Charges from other DHS funds.		
Purpose of Fund: Revolving Fund used by DHS warehouse for the purchase of goods.		
Funds Expended	0	0
Year-End Fund Balance	101,600	101,600
Long Term Care System Fund (HSA2223/A.R.S. § 36-2953)		Appropriated
Source of Revenue: Client revenue for room and board, third-party recovery, interest, and miscellaneous federal monies.		
Purpose of Fund: To fund, in most circumstances, Department of Economic Security administrative and program costs associated with the Long Term Care system. These monies have been allocated to DHS for the cost of a provider rate increase.		
Funds Expended	0	1,379,600
Year-End Fund Balance	0	0
Medical Marijuana Fund (HSA9999/A.R.S. § 36-2817)		Non-Appropriated
Source of Revenue: The fund receives application and renewal fees from medical marijuana dispensaries, civil penalties and private donations.		
Purpose of Fund: To regulate dispensation, prescription, and use of medical marijuana, including an electronic registry of dispensary agents, patients and designated caregivers.		
Funds Expended	1,682,500	4,250,700
Year-End Fund Balance	5,513,100	4,996,400
Multiple Sclerosis Awareness Fund		Non-Appropriated
(No Fund Number/A.R.S. § 28-2440, A.R.S. § 36-1200)		
Source of Revenue: A deposit of \$17 of each \$25 original and annual renewal of Multiple Sclerosis Awareness special plate fee and interest earnings. The remaining \$8 is deposited to the State Highway Fund for special plate administration.		
Purpose of Fund: To issue Multiple Sclerosis special plates, if ADOT receives \$32,000 by December 31, 2011. ADOT is to annually deposit these monies, excluding administrative fees, into the DHS-administered Multiple Sclerosis Awareness Fund for statewide multiple sclerosis awareness and outreach services. The fund was never established, since ADOT did not receive any initial revenue prior to December 31, 2011.		
Funds Expended	0	0
Year-End Fund Balance	0	0

SUMMARY OF FUNDS	FY 2012 Actual	FY 2013 Estimate
Medical Student Loan Fund (MSA3306/A.R.S. § 15-1725)		Non-Appropriated
Source of Revenue: Monies from legislative appropriations, and loan repayments of principal, interest, and penalties received by the board. These monies are exempt from lapsing. The FY 2013 Higher Education Budget Reconciliation Bill (Laws 2012, Chapter 301) transferred the administration of the fund to the Department of Health Services. All monies in the fund are to be used for the Primary Care Provider Loan Repayment Program. There are no new legislative appropriations into this fund.		
Purpose of Fund: To provide loans to defray the medical education expenses of medical program graduates, in return for a service commitment to the state.		
Funds Expended	0	15,000
Year-End Fund Balance	35,800	34,100
Newborn Screening Program Fund (HSA2184/A.R.S. § 36-694.01)		Appropriated
Source of Revenue: Monies received as part of the hospital charges for each child born in Arizona. Fee limits for newborn screening are \$30 for the first blood and hearing screening and \$40 for the second blood and hearing screening.		
Purpose of Fund: To provide monies for the centralized testing of all newborns in the state for a standard set of 29 metabolic and congenital (environmental/inherited) disorders. Every 4 years the department solicits bids for the contracting of these tests. The State Health Lab holds the current contract. In addition, the fund provides monies for follow-up counseling for the parents of affected infants.		
Funds Expended	4,948,500	6,692,600
Year-End Fund Balance	2,166,100	654,000
Nursing Care Institution Resident Protection Fund (HSA2329/A.R.S. § 36-446.08)		Appropriated
Source of Revenue: Civil penalties paid by nursing care institution administrators and assisted living facility managers for violations of their licenses or certifications.		
Purpose of Fund: For the protection of the health and property of residents of nursing care facilities that are found deficient.		
Funds Expended	144,400	438,100
Year-End Fund Balance	1,161,200	823,100
Oral Health Fund (HSA3038/A.R.S. § 36-138)		Non-Appropriated
Source of Revenue: Monies received from AHCCCS contracts for dental services.		
Purpose of Fund: To provide dental services to Medicaid-eligible children identified by the DHS Oral Health program.		
Funds Expended	258,100	286,100
Year-End Fund Balance	626,500	586,400
Prescription Drug Rebate Fund (HSA2546/A.R.S. § 36-2930)		Partially-Appropriated
Source of Revenue: Prescription drug rebate collections, interest from prescription drug rebate late payments and Federal monies made available to this state for the operation of the Medicaid Prescription Drug Rebate Program.		
Purpose of Fund: To pay for the administrative costs of the Prescription Drug Rebate Program, for payments to contractors or providers in the administration's medical services programs and to offset General Fund costs for Medicaid programs. Also used to return the federal share of Prescription Drug Rebate collections and interest from late payments to the federal Centers for Medicare and Medicaid Services by offsetting future federal draws. Federal monies in this fund are non-appropriated through FY 2012. Beginning in FY 2013, federal monies are listed as Expenditure Authority. All Other monies are appropriated.		
Funds Expended - Appropriated	33,900,000	0
Funds Expended - Non-Appropriated	0	0
Year-End Fund Balance	0	0
Risk Assessment Fund (HSA2427/A.R.S. § 36-1693)		Non-Appropriated
Source of Revenue: Monies from the Department of Environmental Quality for risk services performed by DHS. The fund may also receive legislative appropriations, gifts, grants, or donations.		
Purpose of Fund: To conduct health effects studies and risk assessments of public health risks from environmental exposure, to evaluate and calculate cleanup standards, to communicate health risks to the public, and for administrative costs of those activities.		
Funds Expended	14,400	20,000
Year-End Fund Balance	19,500	19,500

SUMMARY OF FUNDS	FY 2012 Actual	FY 2013 Estimate
Serious Mental Illness Services Fund (HSA2464/A.R.S. § 36-503.02)		Non-Appropriated
Source of Revenue: Monies appropriated from the Tobacco Litigation Settlement Account, other legislative appropriations and interest earned on these monies. The fund received a one-time appropriation of \$50,000,000 from tobacco settlement funds in FY 2001. The final \$1,100,000 was spent in FY 2005.		
Purpose of Fund: To fund Community Housing, Vocational Rehabilitation, and other recovery support services to persons with serious mental illnesses.		
Funds Expended	0	0
Year-End Fund Balance	2,800	2,800
Seriously Mentally Ill Housing Trust Fund (HSA2555/A.R.S. § 41-3955.01)		Non-Appropriated
Source of Revenue: Receives \$2,000,000 from the proceeds of the sales of unclaimed property and interest income. The FY 2012 Revenues BRB (Laws 2011, Chapter 28) requires that the first \$2,000,000 in unclaimed property revenues are distributed to the Seriously Mentally Ill Housing Trust Fund. The second \$2,500,000 in unclaimed property revenues are distributed to the Housing Trust Fund, which is administered by the Department of Housing.		
Purpose of Fund: For housing projects for the seriously mentally ill. The appropriated portion pays for administration expenses, and may not exceed 10% of the Seriously Mentally Ill Housing Trust monies. The non-appropriated portion of the fund is used for the operation, construction or renovation of a facility that houses seriously mentally ill individuals.		
Appropriated Funds Expended	0	0
Non-Appropriated Funds Expended	0	2,000,000
Year-End Fund Balance	2,012,300	2,024,600
Service Fees Increase Fund (HSA1050/Laws 2010, 7th Special Session, Chapter 12)		Non-Appropriated
Source of Revenue: General Fund fee increase from fees raised pursuant to Laws 2010, 7th Special Session, Chapter 12.		
Purpose of Fund: Operating activities.		
Funds Expended	1,100	0
Year-End Fund Balance	0	0
Smoke Free Arizona Fund (HSA2541/A.R.S. § 36-601.01)		Non-Appropriated
Source of Revenue: A 2¢ per pack tax on cigarettes. Any revenues not used by the department to enforce the smoking ban are deposited to the Tobacco Tax Products Fund to be used for education programs to reduce or eliminate tobacco use.		
Purpose of Fund: To enforce the provisions of Proposition 201 (Smoke Free Arizona Act) enacted in the 2006 General Election. The Smoke Free Arizona Act banned smoking in public places except retail tobacco stores, veteran and fraternal clubs, hotel rooms designated as smoking rooms, and outdoor patios.		
Funds Expended	3,242,900	2,940,500
Year-End Fund Balance	524,100	595,600
Substance Abuse Services Fund (HSA2227/A.R.S. § 36-2005)		Appropriated
Source of Revenue: The fund receives 23.6% of monies collected from Medical Services Enhancement Fund, which is a 13% penalty levied on criminal offenses, motor vehicle civil violations, and game and fish violations. Monies are deposited into 2 subaccounts.		
Purpose of Fund: To provide alcohol and other drug screening, education or treatment for persons court-ordered to attend and who do not have the financial ability to pay for the services, to contract for preventive or rehabilitative and substance abuse services, and to provide priority for treatment services to pregnant substance abusers.		
Funds Expended	2,250,000	2,250,000
Year-End Fund Balance	1,749,800	2,263,700
Temporary Transaction Privilege and Use Tax - 1% Fund (HSA1032/Article IX, Section 12.1 of State Constitution)		Non-Appropriated
Source of Revenue: Temporary 3-year 1-cent sales and use tax authorized by voters during the May 2010 special election. The tax expires after May 31, 2013.		
Purpose of Fund: To provide funding for primary and secondary education, health and human services and public safety. Expenditures are not displayed to avoid double counting General Fund.		
Funds Expended	0	0
Year-End Fund Balance	0	0

SUMMARY OF FUNDS	FY 2012 Actual	FY 2013 Estimate
Tobacco Tax and Health Care Fund - Health Education Account (HSA1308/A.R.S. § 36-772)		Non-Appropriated
Source of Revenue: The account receives 23¢ of each dollar deposited in the Tobacco Tax and Health Care Fund and 2¢ of each dollar in the Tobacco Products Tax Fund.		
Purpose of Fund: Monies are used for community-based education and evaluation, and other programs to discourage tobacco use among the general public, specifically targeting minors and culturally diverse populations. The monies from the Tobacco Products Tax Fund are used for the prevention and detection of the 4 leading causes of death.		
Funds Expended	18,076,300	18,400,000
Year-End Fund Balance	7,741,100	6,391,100
Tobacco Tax and Health Care Fund - Health Research Account (HSA2096/A.R.S. § 36-275, A.R.S. § 36-773)		Partially-Appropriated
Source of Revenue: The fund receives monies from the Health Research Account of the Tobacco Tax and Health Care Fund.		
Purpose of Fund: Monies are used for research into the prevention and treatment of tobacco-related disease and addiction.		
Appropriated Funds Expended	1,000,000	1,000,000
Non-Appropriated Funds Expended	5,946,400	5,027,000
Year-End Fund Balance	9,807,100	11,801,100
Tobacco Tax and Health Care Fund - Medically Needy Account (HSA1306/A.R.S. § 36-774)		Partially-Appropriated
Source of Revenue: The account receives funding from the Medically Needy Account of the Tobacco Tax and Health Care Fund, which is managed by AHCCCS. All monies remaining unexpended at the end of the fiscal year revert to the AHCCCS Medically Needy Account. <i>(See Tobacco Tax Table in the AHCCCS section.)</i>		
Purpose of Fund: Monies are used for a variety of health programs that are intended to increase primary care and mental health services for uninsured and low-income populations.		
Appropriated Funds Expended	35,129,200	35,167,000
Non-Appropriated Funds Expended	0	0
Year-End Fund Balance	0	0
Vital Records Electronic Systems Fund (HSA3039/A.R.S. § 36-341.01)		Appropriated
Source of Revenue: Fees collected for searches, copies of records, applications to file delayed records, requests for supplementary birth certificates, following adoption, legitimation, paternity determination, surgical alterations, and chromosomal counts, or amendments to existing records. As permanent law, the FY 2012 Health BRB removed statutory fee caps and allows DHS to set vital records fees for individuals and counties that access the vital records electronic system. Total revenues are limited to \$4,530,000. Of the first \$4,000,000, 85% will be required into the Vital Records Electronic Systems Fund and 15% will be deposited into the General Fund. For any revenue above \$4,000,000, 40% will be deposited into the Vital Records Electronic Systems Fund and 60% will be deposited into the General Fund.		
Purpose of Fund: To develop and operate a new vital records automated system.		
Funds Expended	2,019,500	3,607,500
Year-End Fund Balance	670,000	332,500

*As reported by the agency. Actual ending balance will not be negative.