



LEGISLATIVE BUDGET COMMISSION

Ken Pruitt, Chair

Meeting Packet

Wednesday, May 26, 2004

1:30 p.m. – 3:30 p.m.

412 Knott

***(Please bring this packet to the committee meeting.
Duplicate materials will not be available.)***

LEGISLATIVE BUDGET COMMISSION AGENDA

March 26, 2004

1:30 p.m.- 3:30 p.m.

Room 412, Knott Building

MEMBERS

Senator Ken Pruitt
Senator Lisa Carlton
Senator Dennis Jones
Senator Ron Klein
Senator Tom Lee
Senator Les Miller
Senator Rod Smith

Representative Bruce Kyle
Representative Carole Green
Representative Wilbert "Tee" Holloway
Representative Joe Negron
Representative Jerry Paul
Representative David Simmons
Representative Leslie Waters

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Department: Agency for Health Care Administration
EOG Number: B2004-0574

Problem Statement: The Agency for Health Care Administration and the Florida Healthy Kids Corporation estimate a need for an additional \$8,259,216 in federal Title XXI funds as a result of a projected shortfall in the Florida Healthy Kids component of the KidCare program. This additional need for funding is based on a federally required retroactive family premium reduction from \$20 to \$15 for persons below 150% of the federal poverty level and a lower attrition rate than originally estimated.

Agency Request: The Agency for Health Care Administration is requesting additional budget authority of \$8,259,216 in the Medical Care Trust Fund to provide the Florida Healthy Kids Corporation additional federal funds necessary to alleviate the budgetary shortfall. The Corporation has sufficient matching funds to earn the federal funds. If this amendment is not approved, the agency will be unable to draw the additional federal funds on behalf of the Corporation to allow the program to serve the current and projected enrollments.

Governor's Recommendation: Recommend approval to increase budget authority in the Medical Care Trust Fund by \$8,259,216 to enable the Florida Healthy Kids Corporation to receive additional federal funds due to a federally required retroactive family premium reduction and a lower attrition rate than originally estimated.

Commission Staff Comments:

SENATE: Recommend approval as recommended by the Governor's Office.

HOUSE: Pending.

Senate Subcommittee: Health and Human Services
Senate Analyst: Elaine Peters
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Line Item No.	Budget Entity / Fund / Appropriation Category Title		REQUESTED BY AGENCY	RECOMMENDED BY GOVERNOR	APPROVED BY THE LEGISLATIVE BUDGET COMMISSION
	LAS/PBS Account Number	CF	Appropriation	Appropriation	Appropriation
AGENCY FOR HEALTH CARE ADMINISTRATION					
145	Health Care Services Children's Special Health Care Medical Care Trust Fund Special Categories G/A Florida Healthy Kids Corporation 68500100-100031-00-2474		8,259,216	8,259,216	

Department: Agency for Health Care Administration
EOG Number: B2004-0619

Problem Statement: The General Appropriations Act for FY 2002-03 included proviso language, following Specific Appropriation #199, that authorized the Agency for Health Care Administration to seek and receive, in compliance with Chapter 216, Florida Statutes, additional budget authority to implement the expansion of the physician upper payment limit (UPL) program to increase Medicaid fees for health professionals. The expansion was contingent upon the availability of state match from existing state funds or local sources that do not increase the requirement for state General Revenue or Tobacco Settlement Trust Funds. While the agency began the process of seeking federal approval of an amendment to the Medicaid state plan to permit supplemental payments to physicians, it was not completed in FY 2002-03.

Subsequently, the General Appropriations Act for FY 2003-04 also includes proviso language following Specific Appropriation #182 that authorizes the agency to make special Medicaid payments to physicians and provides \$33,861,866 from the Medical Care Trust Fund for the payments. However, the proviso requires the agency to submit a plan to the Legislative Budget Commission for approval prior to implementation. After a lengthy delay, the state plan amendment for special Medicaid payments for physician services was approved by the Centers for Medicare and Medicaid Services (CMS) on April 23, 2004. The conditions under which this plan was approved require additional budget authority in the amount of \$31,172,127 to pay the increased Medicaid fees for specified health professionals.

Agency Request: The Centers for Medicare and Medicaid Services (CMS) has approved the State Plan Amendment for the special Medicaid payments for physician services. Based on the proviso language requirements the Agency for Health Care Administration has developed a plan for the special Medicaid payments and is requesting approval of the plan. This plan is attached and provides for the utilization of matching funds from Florida medical schools and specifies the conditions under which Medicaid fees for health professionals will be increased. The agency also requests release of the \$33,861,866 currently held in unbudgeted reserve pending approval of the plan by the LBC as well as an additional \$31,172,127 in Medical Care Trust Fund appropriation to enable the agency to make the special Medicaid payments for the 2002-03 and 2003-04 fiscal years.

If the budget amendment is not approved, the increased special Medicaid payments cannot be made and additional federal funds of \$65,033,993 will not be realized in FY 2003-04.

Governor's Recommendation: Recommend approval to increase budget authority by \$31,172,127 in the Medical Care Trust Fund and approval of the plan for special Medicaid payments under the physical upper payment limit (UPL) program plus release of \$33,861,866 from unbudgeted reserve in the Medical Care Trust Fund.

Commission Staff Comments:

SENATE: Recommend approval as recommended by the Governor's Office.

HOUSE: Pending.

Senate Subcommittee: Health and Human Services

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Physician UPL Summary of Estimated Payments

54.34% of Usual and Customary Charges	10/1/02-6/30/03			Cumulative Federal Dollars Since Inception
	Total	9 Months	9 Months	
	9 Months	State Share Certified	Federal Share	
Medical School				
University of Florida	22,823,326	9,380,387	13,442,939	13,442,939
University of Miami	20,999,021	8,630,597	12,368,423	12,368,423
University of South Florida	3,485,541	1,432,557	2,052,984	2,052,984
Nova Southeastern University	-	-	-	-
Florida State University	12,506	5,140	7,366	7,366
	47,320,393	19,448,681	27,871,711	27,871,711

54.34% of Usual and Customary Charges	7/1/03-6/30/04 Prospective			Cumulative Federal Dollars Since Inception
	Total	12 Months	12 Months	
	12 Months	State Share Certified	Federal Share	
Medical School				
University of Florida	30,431,101	12,507,182	17,923,918	31,366,857
University of Miami	27,998,694	11,507,463	16,491,231	28,859,654
University of South Florida	4,647,388	1,910,076	2,737,311	4,790,295
Nova Southeastern University	-	-	-	-
Florida State University	16,674	6,853	9,821	17,187
	63,093,857	25,931,575	37,162,282	65,033,993

Notes

1. Projections use estimated data as of 7/1/01-6/30/02, paid through 1/31/03. Updated data may indicate Nova Southeastern University as eligible for distributions in future periods.
2. Based upon 54.34% of usual and customary charges.
3. All direct UPL payments made to Medicaid providers.

Line Item No.	Budget Entity / Fund / Appropriation Category Title LAS/PBS Account Number	CF	REQUESTED BY AGENCY			RECOMMENDED BY GOVERNOR			APPROVED BY THE LEGISLATIVE BUDGET COMMISSION		
			Appropriation	Reserve	Release	Appropriation	Reserve	Release	Appropriation	Reserve	Release
182	AGENCY FOR HEALTH CARE ADMINISTRATION Health Care Services (68500000) Medicaid Services to Individuals (68501400) Medical Care Trust Fund Special Categories Physician Services 68501400-102541-00-2474		31,172,127	(33,861,866)	65,033,993	31,172,127	(33,861,866)	65,033,993			

Agency for Health Care Administration
Medicaid Physician Upper Payment Limit Program
Implementation Plan

April 29, 2004

The Centers for Medicare and Medicaid Services (CMS) approved State Plan Amendment (SPA) 2002-16, regarding a physician upper payment limit, on April 23, 2004. The effective date of the SPA is October 1, 2002.

Specific Appropriation 182 within the General Appropriations Act for State Fiscal Year (SFY) 2003-04 includes \$33,861,866 in the Medical Care Trust Fund for special Medicaid payments to physicians. Furthermore, the Agency for Health Care Administration (the Agency) is to submit a plan to the Legislative Budget Commission for approval prior to implementation. The plan "...shall give priority to physician fee increases for services provided to individuals under the age of 21 with emphasis on specialty care for those services deemed by the Agency to be the most difficult to secure under the current methodology. The plan should also consider additional payments to physicians affiliated with designated state medical schools."

During the approximately 18 months of negotiations between the Agency and CMS regarding this program, the original proposal was revised multiple times. CMS was firm in its insistence that the applied methodology include certain independent confirmations, that Medicaid funds paid to participating physicians not be redirected out of the physician practices, the state share readily identifiable, and the required federal funds be limited to only specified participants. The approved SPA allows the Agency to make supplemental Medicaid payments to physicians employed by or under contract with a medical school that is part of Florida State University, The University of Florida, The University of Miami, The University of South Florida, and Nova Southeastern University.

Although the Agency was unable to obtain specific SPA language prioritizing physician fee increases for services provided to individuals under the age of 21, the result of this program and the additional federal funds within the General Appropriations Act of SFY 2004-05 is \$5,000,000 of General Revenue and \$7,165,450 from the Medical Care Trust Fund to increase reimbursement rates to physicians for services provided to individuals under the age of 21 with emphasis on pediatric specialty care for those services deemed by the agency to be the most difficult to secure under the current reimbursement methodology (Specific Appropriation 215). Due to this provision, the requirements of prioritization of services to children and affiliation with state medical schools have been fulfilled.

With the approval of the Legislative Budget Commission, the Agency is ready to begin distributions of these supplemental payments. Supplemental payments are available to Medicaid physicians affiliated with the five medical schools. The supplemental payments are to be calculated as follows:

- The Agency extracts claims for specified dates of payment for each participating physician, physician practice, or group practice.
- Based upon the lower of the charges or a charge ceiling (yet to be determined by the Agency), the upper payment limit (UPL) is determined as 54.34% of those charges.
- Medicaid payments based upon the fee schedule are deducted from the UPL.
- The balance represents the supplemental payment to be made to the physician, physician practice, or group practice.

The Agency is requesting approval to make lump sum payments for net claims representing payments beginning October 1, 2002. Payments are to be paid via gross adjustments to the individual physician practices.

As the state share for the elapsed periods has already been paid, the Agency will work with the participating universities to certify the state funds dispersed to the participating physician practices. As no Grants and Donations authority was provided during SFY 2004-05, the Agency plans to continue the certification process through June 30, 2005.

Although actual claims must be analyzed to determine the final payments, the Agency estimates the federal share of the supplemental payments for the October 1, 2002 – June 30, 2003 period to be approximately \$27,871,711 as well as \$37,162,282 for the 2003-04 fiscal year. The Agency is requesting the full release of \$33,861,866 in the Medical Care Trust Fund as well as an additional \$31,172,127 in Medical Care Trust Funds appropriations for fiscal year 2003-04 payments.

The Agency must complete the following before actually making any distributions:

- Execute Letters of Agreement with the participating universities
- Obtain certifications of state funds paid to participating physician practices from the participating universities
- Verify the provider numbers of those practices employed by or under contract with the participating medical schools
- Calculate the charge ceiling using updated claims information
- Calculate the UPL using updated claims information
- Calculate the supplemental payments using updated claims information
- Prepare and approve the gross adjustments for payment distributions
- Distribute the gross adjustments to the fiscal agent for payment

Payments for SFY 2003-04 will be made based upon net claims payments made during SFY 2003-04.

Department: Department of Children and Family Services
EOG Number: B2004-0526

Problem Statement: On July 1, 2003, based on an independent study conducted by Mercer Human Resource Consulting, the Department of Children and Family Services (DCF) implemented a uniform rate reimbursement procedure for services provided through the developmental disabilities Home and Community-Based Services (HCBS) Medicaid waiver. The services covered include residential habilitation, in-home supports (live-in), and room and board services. The new rates for residential habilitation and in-home supports now cover the full cost of services related to residential placements under most circumstances. This allows for general revenue payments to be discontinued for providers serving adults who receive residential habilitation or in-home supports (live-in) waiver services and the full SSI benefit equal to \$470.88. Providers of services for adults and children who do not receive residential habilitation or in-home supports waiver services will continue to receive the general revenue payment. The result of this change in payment methodology generated a general revenue surplus in the Room and Board Payments appropriation category. This amendment proposes to transfer the surplus to the HCBS Waiver category, where funds are eligible to earn federal matching funds.

The Developmental Services Program projected a funding deficit in the HCBS Waiver category for the 2003-04 fiscal year. As a result, some rates were reduced and all available resources were considered and recalculated to determine the total need for this year. This estimate of total need assumed approval of this amendment to cover a portion of the deficit.

Agency Request: This amendment requests the transfer of \$2,794,829 in general revenue from the Room and Board Payments category to the HCBS Waiver category to fund Medicaid waiver services. The state will receive an additional \$4,531,066 in federal matching funds by spending the transferred amount for authorized waiver services.

Governor's Recommendation: Recommend approval to transfer General Revenue Fund budget authority of \$2,794,829 and Operations and Maintenance Trust Fund budget authority of \$4,531,066 from the Room and Board Payments for Developmentally Disabled appropriation category to the Home and Community Based Services Waiver appropriation category to meet anticipated spending levels for waiver services for the remainder of FY 2003-04.

Commission Staff Comments:

SENATE: Recommend approval as recommended by the Governor's Office.

HOUSE: Pending.

Senate Subcommittee: Health and Human Services

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Line Item No.	Budget Entity / Fund / Appropriation Category Title LAS/PBS Account Number	CF	REQUESTED BY AGENCY	RECOMMENDED BY GOVERNOR	APPROVED BY THE LEGISLATIVE BUDGET COMMISSION
			Appropriation	Appropriation	Appropriation
CHILDREN AND FAMILIES					
	PERSONS WITH DISABILITIES HOME AND COMMUNITY SERVICES General Revenue Fund				
296	Room and Board Payments for Developmentally Disabled 60910402-100229-00-1000		(2,794,829)	(2,794,829)	
297	Home and Community Based Services Waiver 60910402-101555-00-1000		2,794,829	2,794,829	
	Operations and Maintenance Trust Fund				
296	Room and Board Payments for Developmentally Disabled 60910402-100229-00-2516		(4,531,066)	(4,531,066)	
297	Home and Community Based Services Waiver 60910402-101555-00-2516		4,531,066	4,531,066	

Department: Department of Children and Family Services
EOG Number: B2004-0561

Problem Statement: The Refugee Entrant Assistance Entitlement Program is a 100% federally funded program that provides cash, medical assistance, and social services, for up to eight months from date of entry, to eligible legal refugees. Recent changes in immigration policy by the government of Cuba have caused the monthly number of Cuban refugees fleeing to this country to grow from 1,421 in July 2003 to 4,055 in February 2004, bringing the total year-to-date expenditures for this program to a total of \$5,017,857 as of March 23, 2004.

The total expenditures for Fiscal Year 2003-2004 for the Refugee Entrant Assistance appropriation category are estimated to be \$7,956,160, and the approved budget is \$5,590,195, generating a projected shortfall of \$2,365,965 for the current fiscal year. This appropriation category is 100% funded through a federal entitlement grant.

Agency Request: The Department of Children and Family Services is requesting an additional \$2,365,965 in budget authority in the Refugee Assistance Trust Fund in the Refugee Entrant Assistance category in order to make the necessary payments to eligible refugees. If this action is not approved, the department will have insufficient funding to provide services to all eligible refugees.

Governor's Recommendation: Recommend approval to increase budget authority by \$2,365,965 in the Refugee Assistance Trust Fund for additional federal funds received due to an increase in the number of refugee clients.

Commission Staff Comments:

SENATE: Recommend approval as recommended by the Governor's Office.

HOUSE: Pending.

Senate Subcommittee: Health and Human Services

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House Subcommittee: Human Services

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Line Item No.	Budget Entity / Fund / Appropriation Category Title		REQUESTED BY AGENCY	RECOMMENDED BY GOVERNOR	APPROVED BY THE LEGISLATIVE BUDGET COMMISSION
	LAS/PBS Account Number	CF	Appropriation	Appropriation	Appropriation
CHILDREN AND FAMILIES					
401	Economic Self Sufficiency Program Refugee Assistance Trust Fund Financial Assistance Payments Refugee/Entrant Assistance 60910707-110154-00-2579		2,365,965	2,365,965	

Department: Department of Children and Family Services
EOG Number: B2004-0569

Problem Statement: Within the Economic Self-Sufficiency Program, several Department of Children and Family Services (DCF) districts have documented shortfalls in the Expenses category for the Comprehensive Eligibility Services and Program Management and Compliance budget entities. These projected shortfalls were caused, primarily, by increases in lease costs, necessary enhancements to data systems infrastructure, implementation of essential phone systems, additional costs associated with the relocation of staff between service centers, and increased costs in public assistance mail outs.

Agency Request: This amendment requests the transfer of General Revenue Fund and Administrative Trust Fund budget authority from the Salaries and Benefits category to the Expenses category in order to offset projected shortfalls within the Comprehensive Eligibility Services and Program Management and Compliance budget entities. If this amendment is not approved, several DCF districts will have insufficient funding for lease costs and other expense obligations through the remainder of Fiscal Year 2003-2004.

Governor's Recommendation: Recommend approval to transfer General Revenue Fund budget authority of \$266,310 and Administrative Trust Fund budget authority of \$654,388 from the Salaries and Benefits appropriation category to the Expenses appropriation category to offset projected shortfalls.

Commission Staff Comments:

SENATE: Recommend approval as recommended by the Governor's Office.

HOUSE: Pending.

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Line Item No.	Budget Entity / Fund / Appropriation Category Title LAS/PBS Account Number	CF	REQUESTED BY AGENCY	RECOMMENDED BY GOVERNOR	APPROVED BY THE LEGISLATIVE BUDGET COMMISSION
			Appropriation	Appropriation	Appropriation
CHILDREN AND FAMILIES					
	Comprehensive Eligibility Services General Revenue Fund				
359	Salaries and Benefits 60910702-010000-00-1000		(266,310)	(266,310)	
361	Expenses 60910702-040000-00-1000		266,310	266,310	
	Comprehensive Eligibility Services Administrative Trust Fund				
359	Salaries and Benefits 60910702-010000-00-2021		(654,388)	(654,388)	
361	Expenses 60910702-040000-00-2021		540,728	540,728	
	Program Management and Compliance Administrative Trust Fund				
367	Expenses 60910703-040000-00-2021		113,660	113,660	

Department: Department of Children and Family Services
EOG Number: B2004-0570

Problem Statement: Pursuant to s. 409.1671, Florida Statutes, the provision of foster care and related services within the Department of Children and Family Services (DCF) is being privatized statewide. Funding for these services is not in the correct appropriation category for contracting with community-based care (CBC) lead agencies; therefore, budget authority must be transferred to the correct appropriation category, Grants and Aids - Child Protection.

In addition, a portion of the budget previously transferred to Grants and Aids - Child Protection through amendment number B2004-0313, which was approved by the Legislative Budget Commission on January 8, 2004, needs to be returned to the original service categories to accommodate a change to the privatization transition in District 14 (Polk, Hardee, and Highlands counties). DCF has determined that the CBC lead agency assuming responsibility for child protection services in this district will not be ready to administer adoption services and subsidies until next fiscal year.

Agency Request: This amendment requests the transfer of \$1,633,621 from various administrative and service categories to Grants and Aids - Child Protection in the Child Protection and Permanency budget entity in order to achieve the privatization of foster care and related services in Districts 4, 14, and 15. This amendment also requests the transfer of \$720,426 from Grants and Aids - Child Protection back to the traditional child welfare service categories in order to accommodate modifications to the plan for transitioning foster care and related services to the CBC lead agency in District 14 (Polk, Hardee, and Highlands Counties).

If this amendment is not approved, the department and its community based partners will not be able to provide the appropriate services required to ensure the safety of the children within their custody. Furthermore, they will not complete the privatization transition within the scheduled time frames.

Governor's Recommendation: Recommend approval to transfer \$180,404 of General Revenue Fund budget authority and \$939,787 of trust fund budget authority, from various appropriation categories to the Grants and Aids - Child Protection category to enable DCF to contract with community based lead agencies, and to reverse previously approved transfers in order to accommodate necessary modifications to the privatization plan in District 14.

Commission Staff Comments:

SENATE: Recommend approval as recommended by the Governor's Office.

HOUSE: Pending.

Senate Subcommittee: Health and Human Services

Senate Analyst: Marta Hardy

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Line Item No.	Budget Entity / Fund / Appropriation Category Title		REQUESTED BY AGENCY	RECOMMENDED BY GOVERNOR	APPROVED BY THE LEGISLATIVE BUDGET COMMISSION
	LAS/PBS Account Number	CF	Appropriation	Appropriation	Appropriation
CHILDREN AND FAMILIES					
Child Protection and Permanency					
General Revenue Fund					
Salaries and Benefits					
265	60910304 - 010000 - 00 - 1000		(56,335)	(56,335)	
Other Personal Services					
266	60910304 - 030000 - 00 - 1000		(6,722)	(6,722)	
Expenses					
267	60910304 - 040000 - 00 - 1000		(39,807)	(39,807)	
Adoption Services and Subsidy					
271	60910304 - 103022 - 00 - 1000		93,099	93,099	
G/A-Child Protection					
272	60910304 - 103034 - 00 - 1000		87,305	87,305	
G/A-Family Foster Care					
274	60910304 - 104072 - 00 - 1000		(6,314)	(6,314)	
G/A-Residential Group Care					
275	60910304 - 104073 - 00 - 1000		(35,242)	(35,242)	
G/A-Emergency Shelter Care					
276	60910304 - 104074 - 00 - 1000		(35,984)	(35,984)	

Line Item No.	Budget Entity / Fund / Appropriation Category Title LAS/PBS Account Number	CF	REQUESTED BY AGENCY	RECOMMENDED BY GOVERNOR	APPROVED BY THE LEGISLATIVE BUDGET COMMISSION
			Appropriation	Appropriation	Appropriation
CHILDREN AND FAMILIES					
	Administrative Trust Fund				
	G/A-Child Protection				
272	60910304 - 103034 - 00 - 2021		15,758	15,758	
	G/A-Family Foster Care				
274	60910304 - 104072 - 00 - 2021		(15,758)	(15,758)	
	Tobacco Settlement Trust Fund				
	Salaries and Benefits				
265	60910304 - 010000 - 00 - 2122		(7,862)	(7,862)	
	Expenses				
267	60910304 - 040000 - 00 - 2122		(10,053)	(10,053)	
	Adoption Services and Subsidy				
271	60910304 - 103022 - 00 - 2122		(31,458)	(31,458)	
	G/A-Child Protection				
272	60910304 - 103034 - 00 - 2122		238,549	238,549	
	G/A-Family Foster Care				
274	60910304 - 104072 - 00 - 2122		(64,392)	(64,392)	
	G/A-Residential Group Care				
275	60910304 - 104073 - 00 - 2122		(73,798)	(73,798)	
	G/A-Emergency Shelter Care				
276	60910304 - 104074 - 00 - 2122		(50,986)	(50,986)	

Line Item No.	Budget Entity / Fund / Appropriation Category Title LAS/PBS Account Number	CF	REQUESTED BY AGENCY	RECOMMENDED BY GOVERNOR	APPROVED BY THE LEGISLATIVE BUDGET COMMISSION
			Appropriation	Appropriation	Appropriation
CHILDREN AND FAMILIES					
	Federal Grants Trust Fund				
	Salaries and Benefits				
265	60910304 - 010000 - 00 - 2261		(53,966)	(53,966)	
	Other Personal Services				
266	60910304 - 030000 - 00 - 2261		(7,221)	(7,221)	
	Expenses				
267	60910304 - 040000 - 00 - 2261		(25,740)	(25,740)	
	Adoption Services and Subsidy				
271	60910304 - 103022 - 00 - 2261		112,933	112,933	
	G/A-Child Protection				
272	60910304 - 103034 - 00 - 2261		424,833	424,833	
	G/A-Family Foster Care				
274	60910304 - 104072 - 00 - 2261		(159,168)	(159,168)	
	G/A-Residential Group Care				
275	60910304 - 104073 - 00 - 2261		(107,220)	(107,220)	
	G/A-Emergency Shelter Care				
276	60910304 - 104074 - 00 - 2261		(184,451)	(184,451)	
	Operations and Maintenance Trust Fund				
	Adoption Services and Subsidy				
271	60910304 - 103022 - 00 - 2516		(2,200)	(2,200)	
	G/A-Child Protection				
272	60910304 - 103034 - 00 - 2516		35,616	35,616	
	G/A-Family Foster Care				
274	60910304 - 104072 - 00 - 2516		(23,030)	(23,030)	
	G/A-Residential Group Care				
275	60910304 - 104073 - 00 - 2516		(10,994)	(10,994)	
	G/A-Emergency Shelter Care				
276	60910304 - 104074 - 00 - 2516		608	608	

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			Appropriation	Appropriation	Appropriation
CHILDREN AND FAMILIES					
	Social Services Block Grant Trust Fund				
	Salaries and Benefits				
265	60910304 - 010000 - 00 - 2639		(7,837)	(7,837)	
	Expenses				
267	60910304 - 040000 - 00 - 2639		(14,400)	(14,400)	
	G/A-Child Protection				
272	60910304 - 103034 - 00 - 2639		111,134	111,134	
	G/A-Family Foster Care				
274	60910304 - 104072 - 00 - 2639		(56,679)	(56,679)	
	G/A-Residential Group Care				
275	60910304 - 104073 - 00 - 2639		(32,574)	(32,574)	
	G/A-Emergency Shelter Care				
276	60910304 - 104074 - 00 - 2639		356	356	

Department: Department of Health
EOG Number: B2004-0585

Problem Statement: Women, Infants and Children (WIC) program participants receive monthly benefits (supplemental food products) by means of WIC checks (redeemable for food at grocery stores) that are issued at local WIC clinics throughout Florida. WIC caseloads reached an all-time high of 371,209 participants in October 2003. In addition to caseload increases, food cost inflation has also contributed to the WIC program's record expenditures. The U.S. Department of Agriculture included an annual food inflation factor of 1.14 percent in the funding formula for the FY 2004 allocations. However, abnormally high prices for eggs and milk have pushed Florida's WIC food package cost to an annualized inflation rate of 4.5 percent as of January 2004. The average WIC food package cost is subject to the same food cost inflationary trends as the economy at large. Dramatic increases in fuel costs, coupled with the increased cost of infant formula because of the addition of the DHA (docosahexaenoic acid) and ARA (arachidonic acid) formula products in the spring of 2004, will continue to drive Florida's WIC food package cost higher during the remainder of the fiscal year, as well as impact the costs for the WIC program in FY 2004-2005.

Agency Request: The department requests additional Federal Grants Trust Fund budget authority of \$23,604,735 for the Women, Infants and Children (WIC) program to expend available federal funds. Failure to approve this request will result in the reduction of the number of recipients that currently receive WIC benefits.

Governor's Recommendation: Recommend approval to increase budget authority by \$23,604,735 in the Federal Grants Trust Fund for the Women, Infants and Children (WIC) program because of increased caseloads and the rising costs of food.

Commission Staff Comments:

SENATE: Recommend approval as recommended by the Governor's Office.

HOUSE: Pending.

Senate Subcommittee: Health and Human Services
Senate Analyst: Paul Belcher
Phone Number: (850) 487-5140 or SunCom 277-5140
E-mail Address: paul.belcher@LASPBS.state.fl.us

House Subcommittee: Health
House Analyst: Stephanie Massengale
Phone Number: (850) 488-6204 or SunCom 278-6204
E-mail Address: stephanie.massengale@LASPBS.state.fl.us

Line Item No.	Budget Entity / Fund / Appropriation Category Title		REQUESTED BY AGENCY	RECOMMENDED BY GOVERNOR	APPROVED BY THE LEGISLATIVE BUDGET COMMISSION
	LAS/PBS Account Number	CF	Appropriation	Appropriation	Appropriation
HEALTH					
493	COMMUNITY PUBLIC HEALTH Family Health Services Federal Grant Trust Fund Special Categories Women, Infants, and Children (WIC) 64200300-104200-00-2261		23,604,735	23,604,735	

Department: Department of Health
EOG Number: B2004-0586

Problem Statement: The Department of Health annually requests a realignment of budget authority to fund the implementation of health related programs authorized through contracts with counties and the federal government. It is difficult to predict the annual amount of budget authority that will be required because of these contracts and other unforeseen factors that also contribute to budget changes. The County Health Department (CHD) Trust Fund is projecting a budget shortfall of \$22,793,155 for FY 2003-04 in the Salaries and Benefits category and \$105,668 in the AIDS Patient Care category. In FY's 2000-01, 2001-02 and 2002-03 the department obtained approval of budget amendments of nonrecurring budget authority to offset projected shortfalls for those years. For this year, the department has identified surpluses of \$11,433,820 in various other categories that can be transferred to help offset a portion of the shortfall, leaving an additional need of \$11,465,003 in increased budget authority. This will bring the County Health Department's budget in line with the budget and plans agreed upon by the county authorities pursuant to s. 216.341, F.S., to accommodate federal initiatives and for the ongoing activities related to the provision of direct services.

Agency Request: This amendment requests the transfer of budget authority of \$3,000,000 in the Other Personal Services, \$7,433,820 in Expenses and \$1,000,000 in the Operating Capital Outlay categories, to the Salaries and Benefits category, plus additional budget authority in the Salaries and Benefits category of \$11,359,335, as well as \$105,668 in the AIDS Patient Care category, to cover the overall projected shortfall. Approval of this request will allow the Department of Health to meet financial obligations.

Governor's Recommendation: Recommend approval to transfer \$11,433,820 in budget authority between categories and to increase budget authority by \$11,359,335 in the County Health Department Trust Fund to cover a projected shortfall in salaries and benefits in most of the county health departments and to cover a \$105,668 shortfall in the AIDS Patient Care category.

Commission Staff Comments:

SENATE: Recommend approval as recommended by the Governor's Office.

HOUSE: Pending.

Senate Subcommittee: Health and Human Services
Senate Analyst: Paul Belcher
Phone Number: (850) 487-5140 or SunCom 277-5140
E-mail Address: paul.belcher@LASPBS.state.fl.us

House Subcommittee: Health
House Analyst: Stephanie Massengale
Phone Number: (850) 488-6204 or SunCom 278-6204
E-mail Address: stephanie.massengale@LASPBS.state.fl.us

Line Item No.	Budget Entity / Fund / Appropriation Category Title LAS/PBS Account Number	CF	REQUESTED BY AGENCY	RECOMMENDED BY GOVERNOR	APPROVED BY THE LEGISLATIVE BUDGET COMMISSION
			Appropriation	Appropriation	Appropriation
HEALTH					
	COUNTY HEALTH DEPARTMENTS/ LOCAL HEALTH NEEDS County Health Department Trust Fund				
526	Salaries and Benefits 64200700-010000-00-2141		22,793,155	22,793,155	
530	AIDS Patient Care 64200700-050026-00-2141		105,668	105,668	
527	Other Personal Services 64200700-030000-00-2141		(3,000,000)	(3,000,000)	
528	Expenses 64200700-040000-00-2141		(7,433,820)	(7,433,820)	
536	Operating Capital Outlay 64200700-060000-00-2141		(1,000,000)	(1,000,000)	

Department: Department of Health
EOG Number: B2004-0587

Problem Statement: Proviso language following Specific Appropriation #1949B of the General Appropriations Act for FY 2003-04, a Lump Sum category providing funding for Strengthening Domestic Security, requires the Department of Health to submit a plan for review and approval by the Legislative Budget Commission (LBC) prior to commitment or disbursement of \$15,238,657 earmarked for hospital preparedness. The proposed funding is included in the Annual Funding Strategy 2003-04, which is the companion document to the Public Health Preparedness Strategic Plan 2003-2007, both of which were presented to and approved by the Domestic Security Oversight Board. The amount requested in the annual Funding Strategy 2003-04 has been adjusted to reflect the actual amount needed. These modifications were approved by the Domestic Security Oversight Board.

Personal Protective Equipment	\$ 6,584,000
Isolation Capacity	\$ 1,503,000
Decontamination Equipment	\$ 1,440,000
Burn Surge Capacity	\$ 3,548,157
Pediatric Triage & Treatment	\$ 802,000
Brain Injury Awareness Training	\$ 500,000
Hospital Terrorism	\$ 861,500
Total	\$15,238,657

Agency Request: This amendment requests approval of the attached plan and the release of \$15,238,657 in the Federal Grants Trust Fund from unbudgeted reserve so that the Department of Health can execute the necessary contracts and make expenditures necessary to complete the Strategic Plan. Failure to approve the submitted plan would eliminate the department's ability to spend the federal grant monies provided by the federal Department of Health and Human Services during the grant period, 09/01/03 through 08/31/04, and may result in the forfeiture of federal funds.

Governor's Recommendation: Recommend approval of the department's domestic security plan for spending \$15,238,657 appropriated for hospital preparedness pursuant to Specific Appropriation #1949B in the 2003-04 General Appropriations Act.

Commission Staff Comments:

SENATE: Recommend approval as recommended by the Governor's Office.

HOUSE: Pending.

Senate Subcommittee: Health and Human Services
Senate Analyst: Paul Belcher
Phone Number: (850) 487-5140 or SunCom 277-5140
E-mail Address: paul.belcher@LASPBS.state.fl.us

House Subcommittee: Health
House Analyst: Stephanie Massengale
Phone Number: (850) 488-6204 or SunCom 278-6204
E-mail Address: stephanie.massengale@LASPBS.state.fl.us

Line Item No.	Budget Entity / Fund / Appropriation Category Title LAS/PBS Account Number	REQUESTED BY AGENCY		RECOMMENDED BY GOVERNOR		APPROVED BY THE LEGISLATIVE BUDGET COMMISSION	
		Reserve	Release	Reserve	Release	Reserve	Release
HEALTH							
543A	<u>Community Public Health</u> Federal Grants Trust Fund Statewide Health Support Services Special Categories G/A-Dom Sec-Bio Hlth-Hosp 64200800-100393-00-2261	(15,238,657)	15,238,657	(15,238,657)	15,238,657		

5 year plan

Protecting the Public Health and Safety



ANNUAL FUNDING STRATEGY 2003-04

Florida Department of Health



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About Our Strategy

The Annual Funding Strategy: 2003–04 is a companion to Protecting the Public Health and Safety: Public Health Preparedness Strategic Plan, Five-Year Plan. This document outlines the linkage of federally funded projects to the Public Health Preparedness Strategic Plan goals and objectives. The document includes 2003-04 funded projects from two Department of Health and Human Services (HHS) cooperative agreements:

Centers for Disease Control and Prevention (CDC), Public Health Bioterrorism Preparedness Program (\$46,997,742)

Health Resources and Services Administration (HRSA), National Hospital Bioterrorism Preparedness Program (\$25,775,967)

Florida's two requests for funding were submitted to HHS on July 1, 2003. Federal dollars subsequently were awarded for the project period from August 31, 2003 through August 30, 2004. This document represents projects authorized and funded in the August 2003 Notice of Grant Awards. The 2003–04 projects were based on health and medical priorities identified in the federal guidance and Florida's 2002 Domestic Security Strategic Planning meeting. Using these priorities, the CDC application was developed in a participatory process within the Department of Health including representation from the impacted public health programs, both at the central office and field levels. The Regional Domestic Security Task Force, Health and Medical co-chairs, represented their respective regional needs and made the final determination of the projects to be requested. The HRSA funding request was drafted by Department of Health staff, based on identified priorities validated by the HRSA/CDC Bioterrorism Advisory Committee through several rounds of application review.

Since July 2003, two initiatives have been undertaken that will strengthen the public health preparedness process for requesting future federal funding. The formal health and medical preparedness planning process has resulted in a strategic plan that provides the framework for preparing Florida's health care system to be able to respond to disease outbreaks and natural and man-made disasters, including acts of terrorism. The State Working Group's Health/Medical/Hospital/EMS Committee is providing technical advice to both the Domestic Security Program and the broader Public Health Preparedness Program.


 5
year
plan

Goal 1 Informed, alert and empowered health care workforce and public

OBJECTIVE 1.1 EDUCATED AND ALERT HEALTH CARE WORKFORCE Ensure that key health care professionals receive appropriate education and training for preparedness and response related to infectious disease outbreaks, terrorism and other public health threats and emergencies.

PROJECT	STRATEGY/PROJECT ID	DESCRIPTION	FUNDING SOURCE	AMOUNT AWARDED
Public health education staff and training support	1.1a CG00001 CG00009 CG00008 CG00014	Administration and management of statewide Distance Learning Network and coordination of public health preparedness training programs, including development and implementation of core competencies	CDC	\$944,799
Regional public health training support	1.1a 1.1b CG00002	Provide support to regions for local implementation of preparedness education and training	CDC	\$400,000
Statewide training support	1.1a 1.1b CG00003	Expansion and deployment of learning management system, conduct statewide training and education workshops, support local education demonstration projects	CDC	\$480,000
Satellite network equipment	1.1a 1.1b CG00004	Continue expansion of the state's Distance Learning Network through support of equipment upgrades and new downlink sites	CDC	\$50,000
Speakers Bureau	1.1b CG00013	Contracted services for on-line Speakers Bureau for preparedness and response training and education (Florida Emergency Medicine Foundation)	CDC	\$80,000
Emergency response training	1.1b CG00006	Contracted training for first responders in WMD awareness (University of Miami)	CDC	\$1,000,000
Health care provider training	1.1b CG00007	Contracted training for health care providers in Basic Disaster Life Support and four video teleconferences on selected health topics (Florida State University)	CDC	\$130,000
School health nurse WMD awareness training	1.1b CG00011	Contracted training for school health nurses on WMD awareness and response (NOVA Southeastern University)	CDC	\$256,053
Brain injury awareness training	1.1b H500008	Deliver training to non-trauma center hospital staff for awareness of brain injuries that may result from blast, explosion or crushing	HRSA	\$500,000
Epidemiology training	1.1b CB00008	Deliver epidemiology and disease reporting training to health care professionals	CDC	\$150,000
Environmental health training	1.1b CG00005	Continuation of environmental health GIS/GPS training to county health department staff	CDC	\$50,000
Smallpox educational outreach	1.1b CBS0009	Conduct smallpox education outreach to first responder community and health care professionals	CDC	\$900,000



OBJECTIVE 1.2 INFORMED, ALERT AND EMPOWERED PUBLIC Provide needed health/risk information to the public, public officials and key partners before, during and after an event of public health significance.

PROJECT	STRATEGY/PROJECT ID	OUTCOME	FUNDING SOURCE	AMOUNT AWARDED
Communications infrastructure	1.2a CF00001	Communications infrastructure that provides a statewide network of highly trained communications professionals who will work together to provide risk communications information before, during and after all-hazards events	CDC	\$383,518
Communications outreach	1.2c CF00002	Strengthens public health through communications partnerships with border states, in-state response partners, public health journalists and associations representing populations with communications barriers. Outreach includes exchange of 24-hour contact information, sharing best practices and training and exercising Emergency Support Function (ESF) ¹⁴ and the joint information center (JIC)	CDC	\$128,429
Media relations	1.2c CF00003	Establishes stronger working relationships statewide with the media through state and local outreach with public health bioterrorism information and training. Establishes recognition of in-depth public health reporting. Provides training on issues and creates a cadre of trained journalists available for pool reporting during an event. This project funds two positions to provide communications activities in support of widespread and improved communications at the state, regional and local level.	CDC	\$178,858
Cultural competency	1.2b 1.2c CG00012	Conduct focus groups to identify cultural competencies for diverse and hard to reach populations to aid the dissemination of preparedness information	CDC	\$80,000
Communications resource materials	1.2a CF00004	Evaluates, develops and distributes information materials to the public, media, CHDs' and CMS' public information officers (PIOs), DOH leadership and public health media response partners. These include information templates, a website, news releases, a public health information materials campaign, public service announcements and news conferences. Includes two contracted staff for risk writing.	CDC	\$971,338
Secure conference call support	1.2c CFS0005	Support statewide secure conference calls with county health department public information officers	CDC	\$125,000
Poison Control Center information surge	1.2c H200003	Enhance capacity of the three Florida centers to respond to a surge in inquiries from the public and health care professionals during an event.	HRSA	\$366,000



Goal 2 Protected health care community

OBJECTIVE 2.1 PERSONAL PROTECTIVE EQUIPMENT (PPE) In urban areas, ensure adequate PPE and training for 250 or more health care system personnel and 50 or more public health personnel per million peak population during a biological, chemical or radiological incident. In rural areas, PPE and training are required for 125 or more health care system personnel and 25 or more public health personnel per million peak population.

PROJECT	STRATEGY/PROJECT ID	OUTCOME	FUNDING SOURCE	AMOUNT AWARDED
Hospital PPE	2.1a H200013 H500001	Provide standard package of PPE and associated training to 80 acute care hospitals (year 2 of 3-year roll out to all acute care hospitals)	HRSA	\$5,804,000
Hospital PPE training	2.1a H500002	Provide training support to 78 hospitals funded in year 1 for PPE and decontamination equipment	HRSA	\$780,000
EMS PPE	2.1c H300003	Provide standard package of PPE for private EMS agencies (companion issue with ODP funding to roll out to 100% of EMS agencies)	HRSA	\$3,084,150

OBJECTIVE 2.2 DECONTAMINATION EQUIPMENT Ensure that adequate portable or fixed decontamination systems are available to manage 500 or more pediatric and adult patients and health care workers per million peak population who have been exposed to biological, chemical or radiological agents.

PROJECT	STRATEGY/PROJECT ID	OUTCOME	FUNDING SOURCE	AMOUNT AWARDED
Hospital decontamination equipment	2.2a H200015	Provide standard package of decontamination equipment to 80 acute care hospitals (year 2 of 3-year roll out to all acute care hospitals)	HRSA	\$1,440,000

OBJECTIVE 2.3 ISOLATION/QUARANTINE CAPACITY Upgrade or maintain the state's airborne infectious disease isolation capacity to require that at least one negative pressure, HEPA-filtered isolation facility is available in each region. These facilities must be able to support the initial evaluation and treatment of 10 adult and pediatric patients with symptoms suggestive of smallpox, plague or hemorrhagic fever.

PROJECT	STRATEGY/PROJECT ID	OUTCOME	FUNDING SOURCE	AMOUNT AWARDED
Hospital negative pressure study	2.3a H200005	Review current negative pressure capacity statewide and provide recommendations for minimum standards and surge capacity	HRSA	\$250,000
Hospital isolation capacity	2.3b H200006 H200007	Provide hospital negative pressure capacity based on standards set in the negative pressure study and prioritized by the Regional Domestic Security Task Forces	HRSA	\$1,253,000



Goal 3 Rapid detection, investigation and response to disease outbreak

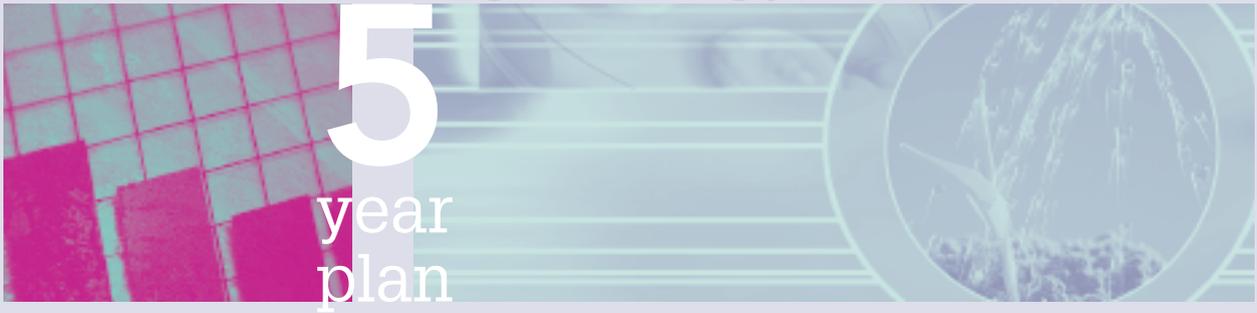
OBJECTIVE 3.1 LABORATORY CAPACITY Develop and implement a statewide capacity to provide rapid and effective laboratory services (i.e., delivery, analysis and reporting) in support of the response to public health threats and emergencies including chemical, radiological and biologic terrorism and other infectious disease outbreaks.

PROJECT	STRATEGY/PROJECT ID	OUTCOME	FUNDING SOURCE	AMOUNT AWARDED
Public health laboratory capacity-biological	3.1a CC00002–CC00006 CC00009 CC00010	Equip and staff five Biologic Safety Level 3 suites in Jacksonville, Miami, Lantana and Tampa	CDC	\$2,588,853
Public health laboratory facilities	3.1a CC00011	Complete Lantana and Miami branch laboratory facility upgrades to accommodate Biological Safety Level 3 lab	CDC	\$1,522,506
Public health laboratory security	3.1a CC00007	Implement security guard and electronic surveillance systems at the public health laboratories	CDC	\$755,698
Laboratory information management system	3.1a CC00008	Develop and implement Laboratory Information Management System that integrates with the national Laboratory Response Network and Florida public health surveillance systems to share laboratory testing information and result real-time	CDC	\$1,931,750
Hospital Level A laboratory training	3.1a CC00001	Deliver laboratory training to hospital laboratories to rule out testing of biologic and chemical agents and safely package and ship specimens to reference laboratories	CDC	\$110,500
Hospital laboratory enhancements	3.1a H400001	Provide equipment and supplies to hospital laboratories to perform rule out testing on suspected terrorism agents and safely package and ship specimens to reference laboratories	HRSA	\$500,000
Agricultural laboratory capacity-biological	3.1a CC00012 CC00013 CC00014	Implement Laboratory Response Network protocols for biologic agent testing at food and veterinarian laboratories	CDC	\$450,000
Public health laboratory capacity-chemical	3.1a CD00001 through CD00011	Equip and staff three Level One chemical laboratory suites in Jacksonville, Miami and Tampa and one Level Two chemical laboratory suite in Jacksonville	CDC	\$899,650



OBJECTIVE 3.2 DISEASE SURVEILLANCE, INVESTIGATION AND RESPONSE CAPACITY Ensure the capability to rapidly detect and mitigate a disease outbreak through a highly functioning disease surveillance, investigation and response system.

PROJECT	STRATEGY/PROJECT ID	OUTCOME	FUNDING SOURCE	AMOUNT AWARDED
State surveillance and epidemiology support	3.2 CB00002	Provide state-level staff to support Florida's ability to rapidly detect, investigate and respond to disease	CDC	\$656,632
County health department surveillance and epidemiology support	3.2c CB00001	Provide county-level staff to support Florida's ability to rapidly detect, investigate and respond to disease	CDC	\$5,633,203
Hospital surveillance	3.2a H400002	Provide hospital interface with public health surveillance systems	HRSA	\$300,000
Disease reporting system	3.2b CB00003	On-going implementation of Florida's electronic disease surveillance system (Merlin) statewide	CDC	\$343,906
Special surveillance systems	3.2a CBS0010	Develop and evaluate surveillance systems specific to the identification of potential bioterrorism events, including rash-illness surveillance	CDC	\$500,000
Electronic laboratory reporting	3.2a CB00004	Enhance rapid detection of disease through expanding electronic laboratory reporting of results by integrating private laboratory reporting	CDC	\$100,000
Forensic epidemiology	3.2a CA00011	Travel to a forensic epidemiology training course for law enforcement and public health officials	CDC	\$5,000
Epidemiology information exchange	3.2b CB00005	Enhance the electronic exchange of health information across the health care community before, during and after an event through expansion of the EpiCom system to hospitals	CDC	\$254,205
Strategic National Stockpile	3.2c CN00009	Ensure Florida's ability to receive the Strategic National Stockpile and disseminate contents to points of dispensing at the community level through planning, training and exercising	CDC	\$3,620,434
Pharmaceutical caches	3.2c H200011	Enhance the state's stocking of critical pharmaceuticals	HRSA	\$100,000



OBJECTIVE 3.3 FOOD AND WATER SAFETY Ensure the safety of Florida’s food and water supply through partnerships with DACS and the departments of Business and Professional Regulation (DBPR) and Environmental Protection (DEP). These partnerships must foster joint investigations, laboratory analysis and data sharing in the event of a suspected food- or waterborne illnesses or contamination of the food or water supply.

PROJECT	STRATEGY/PROJECT ID	OUTCOME	FUNDING SOURCE	AMOUNT AWARDED
Food- and waterborne surveillance	3.3c CB00006	Develops a digitized surveillance and analysis system that integrates food-, waterborne and chemical diseases and conditions, including laboratory results and risk information from a variety of sources i.e. veterinarians, DOACS, Department of Environmental Protection (DEP), Merlin, FoodNet, PulseNet and EpiInfo	CDC	\$840,000

Goal 4 Efficient health care communications system that is interoperable with other responders in Florida

OBJECTIVE 4.1 COMMUNICATION CONNECTIVITY Ensure effective communications connectivity among public health departments, health care facilities and organizations, law enforcement organizations, emergency management, public officials and others.

PROJECT	STRATEGY/PROJECT ID	OUTCOME	FUNDING SOURCE	AMOUNT AWARDED
Health care partner notification list program	4.1a CE00009	Implementation of software package to manage public health notification lists and assure rapid dissemination of health alerts and information before, during and after an event	CDC	\$450,560
Hospital communications equipment	4.1a H200020 H200021	Enhance hospitals’ ability to communicate with other hospitals, EMS, Emergency Management and law enforcement	HRSA	\$750,000



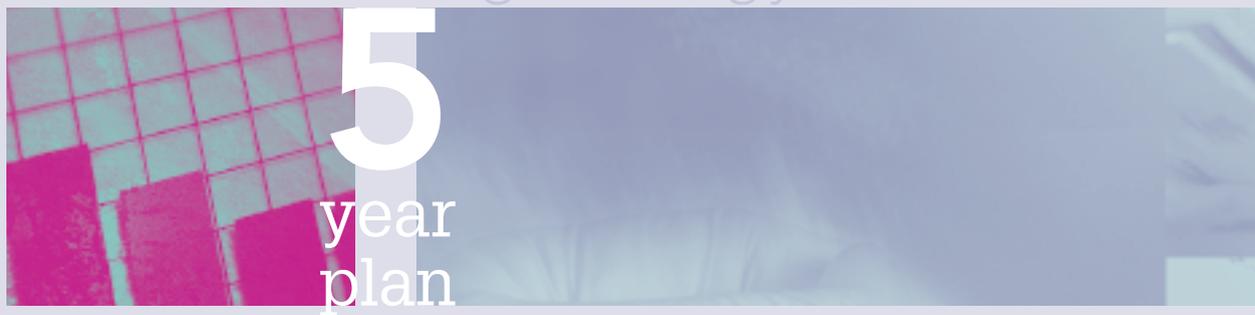
5 year plan

OBJECTIVE 4.2 COMMUNICATIONS SYSTEM BACK UP Ensure continuous communications connectivity for voice and data that is interoperable among public health departments, health care facilities and organizations, law enforcement organizations, emergency management, public officials and others.

PROJECT	STRATEGY/PROJECT ID	OUTCOME	FUNDING SOURCE	AMOUNT AWARDED
Secondary internet connection	4.2a CE00005	Assure secondary internet connection through a statewide area network, should primary connection be compromised	CDC	\$220,639
County health department communications equipment	4.2a CA00003	Enhance CHDs' ability to communicate with county Emergency Management when normal communications methods are compromised	CDC	\$200,000
Blackberry and Right Fax system maintenance	4.2a CE00008	Continued support for blackberry wireless technology connectivity for key public health responders and networked broadcast fax capability	CDC	\$166,664
Disaster recovery	4.2b CE00002	Provide disaster recovery services for mission-critical public health systems	CDC	\$3,169,774

OBJECTIVE 4.3 INFORMATION SECURITY AND CONFIDENTIALITY Ensure the on-going protection of critical health data and information before, during and after an event of public health significance.

PROJECT	STRATEGY/PROJECT ID	OUTCOME	FUNDING SOURCE	AMOUNT AWARDED
Secure access management	4.3a CE00004	Expands the SAM project to replace the user management system with a more robust, enterprise-grade user provisioning tool. Increases the number of applications and users incorporated into the SAM environment. Provides a back up protection system to permit failover and facilitate high availability for the SAM environment. Will provide network and system availability 99% of the time.	CDC	\$870,000
Intrusion detection system	4.3a CE00003	DOH will contract with an independent security firm to monitor all incoming network traffic, and servers with exposure to the internet, to provide rapid intrusion detection.	CDC	\$600,000



OBJECTIVE 4.4 ELECTRONIC EXCHANGE OF DATA Ensure the secure electronic exchange of clinical, laboratory, environmental and other public health information in standard formats between public health partners' computer systems.

PROJECT	STRATEGY/PROJECT ID	OUTCOME	FUNDING SOURCE	AMOUNT AWARDED
Information technology 24/7 support	4.4a CE00001	Maintains 8.0 FTEs established in grant year 2002-2003. These positions provide support for the infrastructure and security of the DOH network, including mission-critical and mission-essential applications, connectivity to those applications and failover and recovery capabilities during a public health event. This funding also provides for on-call pay for staff that provides 24-hour support for the department's applications and network.	CDC	\$879,173
Geographic Information System	4.4a CE00007	Expands the current GIS database to provide additional data layers and purchase updates to current database layers. Funds the purchase of GPS software for department-wide distribution.	CDC	\$70,000
Florida SHOTS system	4.4a CES00010 CES00011	Enhances and maintains the statewide immunization registry (Florida SHOTS) for collecting smallpox vaccination data and other bioterrorism events. Assists with recruiting and tracking vaccine recipients and reports first responder vaccination data on a weekly basis to assist in identifying geographic areas where the number of smallpox vaccinations is low. Extends access to Florida SHOTS to the private sector. Provides for statewide data collection and entry utilizing enhanced security methods. Utilizes regional coordinators to increase enrollment through partnerships with hospitals and private physicians and will develop an automated on-line enrollment and application process.	CDC	\$4,125,163
Secure transport of data	4.4a CE00006	DOH will subscribe to a wireless provider and to state enterprise secure transport services. This will provide secure intranet connectivity to department wireless remote access users performing duties that require access to confidential or surveillance information from emergency rooms, patient or coordinator homes and rapidly deployed coordination sites.	CDC	\$143,000



5 year plan

Goal 5 Health care system capable of responding to events of public health significance resulting in mass casualties

OBJECTIVE 5.1 HEALTH CARE WORKFORCE SURGE CAPACITY In urban areas, establish a response system that facilitates the immediate deployment of 250 or more additional patient care personnel per million peak population. In rural areas, 125 or more additional patient care personnel per million peak population are required.

PROJECT	STRATEGY/PROJECT ID	OUTCOME	FUNDING SOURCE	AMOUNT AWARDED
Health care professional volunteer models	5.1a H200009	Develop models for recruiting, organizing, training and deploying health professionals during and after an event	HRSA	\$150,000
Statewide credentialing system	5.1b H200010	Review and recommend best practices for health care professional credentialing during an event	HRSA	\$75,000

OBJECTIVE 5.2 PRE-HOSPITAL SURGE CAPACITY Develop a mutual aid plan for upgrading and deploying EMS units to jurisdictions they do not normally cover in response to a mass casualty incident due to terrorism or any other disaster. This plan must ensure the capability of providing EMS daily coverage for at least 500 adult and pediatric patients per million peak population.

PROJECT	STRATEGY/PROJECT ID	OUTCOME	FUNDING SOURCE	AMOUNT AWARDED
Pediatric triage and treatment	5.2a H500007 H300002	Enhance pre-hospital EMS personnels' capabilities to appropriately treat pediatric patients	HRSA	\$802,000
Pre-hospital planning	5.2a H300001	Develop the pre-hospital component of the state mass casualty plan	HRSA	\$25,000
Burn Care Training	5.2b H500005	Provide training for pre-hospital EMS on care for a surge in burn patients	HRSA	\$50,000



OBJECTIVE 5.3 HOSPITAL SURGE CAPACITY In preparation for a biological, chemical, radiological or explosive terrorist incident, establish a system capable of providing triage, treatment and disposition for 500 adult and pediatric patients per million peak population with acute illness or trauma that requires hospitalization.

PROJECT	STRATEGY/PROJECT ID	OUTCOME	FUNDING SOURCE	AMOUNT AWARDED
Mass casualty planning	5.3b H200001	Develop the Mass Casualty Health Annex to the CEMP, integrating hospital and pre-hospital components.	HRSA	\$250,000
Burn care surge capacity	5.3b H200019 H500006	Expand temporary burn bed capacity from 60 to 270 through dissemination of equipment, supplies and training to trauma centers	HRSA	\$3,862,534
Disaster Medical Assistance Team Support	5.3a H200012	Provide medical equipment and supplies to 6 DMATs, 1 Regional Medical Response Team and 1 Urban Search and Rescue Team in support of hospital surge capacity	HRSA	\$800,000
Pediatric triage and treatment system for hospital emergency departments	5.3a H500007 H300002	Disseminate pediatric triage and treatment kits and associated training to hospital emergency departments	HRSA	\$802,000
Adult and pediatric ventilators	5.3a H200004	Enhance hospitals' ability to service a surge in patients who require assisted breathing	HRSA	\$1,250,000
Regional Medical Response Team	5.3a CA00006	Design and implement a Regional Medical Response Team in the Tallahassee Region modeled after the federal DMAT	CDC	\$87,227

OBJECTIVE 5.4 MENTAL HEALTH SURGE CAPACITY For those exposed to biological, chemical, radiological or explosive means of terrorism, establish a system that makes available a range of acute psychosocial interventions and longer-term mental health services to adult and pediatric clients and health care workers. This system must accommodate 5,000 clients per million of the exposed population.

PROJECT	STRATEGY/PROJECT ID	OUTCOME	FUNDING SOURCE	AMOUNT AWARDED
Mental health response system	5.4a 5.4b CA00007	Develop a regional mental health response system for the coordination of mental health surge capacity planning, training and exercising	CDC	\$750,000
Mental health volunteer models	5.4a H200018	Develop models for recruiting, organizing, training and deploying mental health professionals during and after an event	HRSA	\$150,000
Mental health training and materials	5.4a H200017 H500009	Disseminate mental health preparedness training materials to hospital and pre-hospital non-mental health providers	HRSA	\$525,000
Mental health awareness training	5.4a CG00010	Provide mental health awareness training to public health and first responder non-mental health providers (University of Miami)	CDC	\$350,000



5 year plan

OBJECTIVE 5.5 MORTUARY SURGE CAPACITY In partnership with Florida funeral directors and medical examiners, develop disaster mass fatality capacity.

PROJECT	STRATEGY/PROJECT ID	OUTCOME	FUNDING SOURCE	AMOUNT AWARDED
Florida Emergency Mortuary Operations System (FEMORS)	5.5a CA00005	Develop and implement FEMORS to provide forensic and victim identification services in an event resulting in mass fatalities	CDC	\$150,000
Mass casualty	5.5a CA00008	Replace equipment damaged or depleted during exercises	CDC	\$41,250
Mass mortality information	5.5a H200023	Produce and disseminate mass fatality information to health care providers	HRSA	\$50,000

Goal 6 Integrated all-hazards planning, assessment and response system

OBJECTIVE 6.1 PUBLIC HEALTH PREPAREDNESS LEADERSHIP Establishes the process for strategic leadership, direction, coordination and activities assessment to ensure state and local readiness and interagency collaboration and preparedness for bioterrorism, other outbreaks of infectious disease and other public health threats and emergencies.

PROJECT	STRATEGY/PROJECT ID	OUTCOME	FUNDING SOURCE	AMOUNT AWARDED
HRSA grant administration and management	6.1a H100001	Provide staff and associated expenses for grants management, contract management, administration and monitoring of the \$25.8m HRSA Cooperative Agreement	HRSA	\$905,784
CDC grant administration and management	6.1a CA00001 CA00010 CA00012 CA00013	Provide staff and associated expenses for the grants management, contract management, administration and monitoring of the \$47 m CDC Cooperative Agreement including the public health 24/7 regional response team.	CDC	\$3,286,235
HRSA/CDC BT Advisory Committee	6.1a CA00002	Provide travel support for the HRSA/CDC BT Advisory Committee quarterly meetings	CDC	\$36,000



OBJECTIVE 6.2 PREPAREDNESS PLANNING Develop, exercise and evaluate a comprehensive public health emergency preparedness and response plan.

PROJECT	STRATEGY/PROJECT ID	OUTCOME	FUNDING SOURCE	AMOUNT AWARDED
Regional electronic field assessment	6.2a CA00004	Develop a GIS application for HAZMAT response	CDC	\$119,021
Hospital terrorism exercises	6.2b H600001 H600002	Support hospitals' field and community disaster exercises, integrating state and Joint Commission Accreditation exercise requirements and hospital preparedness competencies	HRSA	\$861,500
Public Health Preparedness planning and training infrastructure	6.2b CA00003	Support county health departments and the Regional Domestic Security Task Force in standardizing planning, training and implementation of preparedness initiatives at the local level by funding 56 staff and associated expenses	CDC	\$4,762,704

5 year plan

Protecting the Public Health and Safety



PUBLIC HEALTH PREPAREDNESS STRATEGIC PLAN 2003–2007

Florida Department of Health



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Message from the Secretary

The mission of the Florida Department of Health is to protect the public health and safety. Preparedness in the event of disease outbreaks and natural or manmade disasters, including acts of terrorism, is essential to the department's mission of protecting the health and safety of all Floridians and visitors to our state.

In the past, extreme weather has been the focus of preparedness efforts. However, in the wake of the terror attacks of 9/11, followed by the anthrax attack in South Florida, it is clear that the health care system also must be prepared for man-made disease outbreaks and other events resulting in mass casualties. In this new era, preparedness will require an unprecedented level of cooperation not just within the health care community, but also among all of the agencies and individuals involved in responding to an event that provokes a public health emergency.

This strategic plan for prevention and response in public health emergencies, identifies six major preparedness goals:

- 1. An informed, alert and empowered health care workforce and public**
- 2. A protected health care community**
- 3. Rapid detection, investigation and response to disease outbreaks**
- 4. An efficient health care communications system**
- 5. A health care system capable of responding to events of public health significance including mass casualty**
- 6. An integrated all-hazards planning, assessment and response system**

The ultimate benchmark of our success in attaining these goals is the ability of Florida's health care system to ensure consistency in the response to a disease outbreak or natural or manmade disaster, regardless of where it might occur.

Working in partnership with a host of agencies and organizations—and supported by federal grants from the Centers for Disease Control and Prevention (CDC) and the Health Resources and Services Administration (HRSA)—the department has launched an unprecedented effort to make Florida's health care system among the best-prepared in the nation for any emergency. The department continues to strengthen its relationships with law enforcement, fire rescue, pre-hospital emergency medical services and health care providers, hospitals, and federal, state and local government agencies. As a result, the department and its partners are better prepared today than ever to identify and respond to public health emergencies.

With your support, we look forward to continued progress toward a safer Florida.

Sincerely,

John O. Agwunobi, M.D., M.B.A.

Secretary, Florida Department of Health

5 year plan

Overview

This plan provides a framework for preparing Florida's health care system to prevent and respond to disease outbreaks and natural and man-made disasters, including acts of terrorism. Effective prevention and response to these events of public health significance require that all involved coordinate their preparedness initiatives. It is critical that every partner be capable of participating at maximum capacity. This level of preparedness can not be accomplished in the absence of a continuous cycle of planning, equipping, training and exercising.

Defining, describing and evaluating a prepared health care community is a continuous process that requires systematic assessment, planning and evaluation. To that end, this plan will be reviewed annually and will provide the standards that our progress will be measured against. A companion to this document, Public Health Preparedness Funding Strategy: 2003–04, provides details on the department's federally funded preparedness initiatives for the period from August 31, 2003 through August 30, 2004. The department's next preparedness "report card" will be released in November 2004.

Comments and questions about the plan and/or recommendations for improving it are invited and may be submitted to demo@doh.state.fl.us.

Acknowledgments

This strategic plan is the product of many months of work by a dedicated group of public health, health care system and emergency response professionals. Special recognition goes to the department's public health preparedness team, the Regional Domestic Security Task Force's Health and Medical Committee co-chairs and the State Working Group's Health/Medical/Hospital/Emergency Medical Services (EMS) Committee co-chairs and members. Many thanks, also, to all who reviewed the plan and recommended improvements to both the content and format.

Goal 1 Informed, alert and empowered health care workforce and public

In a public health emergency, those delivering or supporting the delivery of health care services must be prepared to seamlessly assume responsibilities that may differ from their normal scope of work. A variety of partnerships will ensure that the public and private sector health care workforce has access to ongoing education and training in preparedness and response. Training and education for the health care community will be linked to competencies needed to respond to disease outbreaks and other public health threats and emergencies, including terrorism. In addition to general awareness training, specialty training is needed by a variety of audiences including persons expected to wear or use personal protective equipment (PPE) and use decontamination equipment. Competency-based training for mental health care awareness and evaluation, brain injury awareness and burn victim triage and treatment cuts across a number of disciplines.

Disaster training exercises involve everyone who plays a role in public health and safety. These exercises bring together a diverse group, including representatives of the public and private health sectors (county health departments, physicians, hospitals and others), state laboratories, law enforcement, emergency management, public and private universities and volunteer organizations. These exercises test and evaluate communications, responses, formal plans and protocols.

The publicity surrounding these exercises, and publications like the department's State of Florida Disaster Preparedness Guide, have raised the public's consciousness of disaster preparedness. Citizens are key partners for an effective and efficient response to events of public health significance. Personal and family disaster planning help mitigate the natural anxieties that arise during an emergency. The public sector continues to encourage families and individuals to prepare family disaster plans and disaster supply kits, and to familiarize themselves with emergency evacuation routes.

OBJECTIVE 1.1 EDUCATED AND ALERT HEALTH CARE WORKFORCE

Ensure that key health care professionals receive appropriate education and training for preparedness and response related to infectious disease outbreaks, terrorism and other public health threats and emergencies.

STRATEGY 1.1A By 8/30/07, 90% of all public health employees will have documented preparedness training that is appropriate for their respective designated responsibilities.

STRATEGY 1.1B By 8/30/07, 80% of health care providers targeted by the department will have participated in a minimum of one annual preparedness education program.

STRATEGY 1.1C By 8/30/07, all graduates of Florida schools of medicine, nursing, pharmacy, veterinary medicine, psychology and public health will have received three hours of public health preparedness training.

STRATEGY 1.1D By 8/30/07, 95% of DOH-sponsored training will be linked to Emergency Response plans, core competencies and job descriptions.

STRATEGY 1.1E The department and its partners will continue to facilitate, coordinate and promote at least one preparedness exercise annually in each region. The exercise must cover a large-scale health/medical scenario affecting both adults and children. These exercises will be integrated and coordinated with other state and institutional exercise requirements.



OBJECTIVE 1.2 INFORMED, ALERT AND EMPOWERED PUBLIC

Provide needed health/risk information to the public, public officials and key partners before, during and after an event of public health significance.

STRATEGY 1.2A By 8/30/07, have a statewide network of trained public information officers in the health field, supported by information and materials.

STRATEGY 1.2B By 8/30/04, establish a risk communications process that outlines strategies to disseminate health information to the general public by strengthening relationships with public information officers in the response community, journalists and media outlets.

STRATEGY 1.2C By 8/30/04, establish a risk communication process that outlines strategies to disseminate health information to key partners, responders and public officials.

Goal 2 Protected health care community

In the event of a public health emergency, it is critical that the people and facilities central to response are afforded maximum protection. The primary means of safeguarding these health care resources is to provide adequate personal protective equipment (PPE), decontamination equipment and isolation capability, as well as appropriate training in the use of this equipment.

The first priority in protecting the health care community is to assure a minimum level of protection for all of Florida's acute care hospitals and emergency medical services agencies. These minimum standards have been established in conjunction with the health care subject matter experts. Ultimately, local comprehensive emergency management planning processes will identify appropriate levels of protection above these minimum standards for their community health care partners.

OBJECTIVE 2.1 PERSONAL PROTECTIVE EQUIPMENT

In urban areas, ensure adequate PPE and training for 250 or more health care system personnel and 50 or more public health personnel per million peak population during a biological, chemical or radiological incident. In rural areas, PPE and training are required for 125 or more health care system personnel and 25 or more public health personnel per million peak population.

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STRATEGY 2.1A By 8/30/07, offer funding for the appropriate level of PPE to each of Florida's acute care hospitals, based on vulnerability and needs identified in the county Comprehensive Emergency Management Plan (CEMP) planning process and standards identified in the Hospital Response Plan (HRP).

STRATEGY 2.1B By 8/30/07, equip 95% of public health employees with appropriate PPE, based on documented position responsibilities.

STRATEGY 2.1C By 8/30/07, offer funding to 95% of EMS agencies for appropriate PPE, based on vulnerability and needs identified in the local CEMP planning process.

STRATEGY 2.1D By 8/30/07, offer funding for a standard PPE package to 95% of the non-hospital health care facilities and/or providers identified as a response partner needing PPE in the CEMP.

OBJECTIVE 2.2 DECONTAMINATION EQUIPMENT

Ensure that adequate portable or fixed decontamination systems are available to manage 500 or more pediatric and adult patients and health care workers per million peak population who have been exposed to biological, chemical or radiological agents.

- STRATEGY 2.2A** By 8/30/05, offer funding for a standard decontamination equipment and training package to each of Florida's acute care hospitals.
- STRATEGY 2.2B** By 8/30/07, in conjunction with the Agency for Health Care Administration, develop a strategy that ensures that new emergency department facilities include a specified fixed decontamination capacity.
- STRATEGY 2.2C** By 8/30/07, offer funding for a standard decontamination equipment package to 95% of the health care facilities (non-hospital) and/or providers identified as a response partner needing decontamination capacity in the CEMP.

OBJECTIVE 2.3 ISOLATION/QUARANTINE CAPACITY

Upgrade or maintain the state's airborne infectious disease isolation capacity to require that at least one negative pressure, HEPA-filtered isolation facility is available in each region. These facilities must be able to support the initial evaluation and treatment of 10 adult and pediatric patients with symptoms suggestive of smallpox, plague or hemorrhagic fever.

- STRATEGY 2.3A** By 8/30/07, every emergency department will have the ability to isolate at least one infectious patient.
- STRATEGY 2.3B** By 8/30/07, offer funds to expand isolation capacity to facilities identified in the CEMPs as those responsible for the treatment of infectious patients.
- STRATEGY 2.3C** By 8/30/04, review and recommend additional isolation/quarantine legislation, as appropriate.

Goal 3 Rapid detection, investigation and response to disease outbreak

The rapid detection, identification, investigation and response to natural or manmade disease outbreaks are at the heart of public health preparedness and public protection. Preventing and responding to disease outbreaks requires early detection, comprehensive investigation and rapid intervention to potential disease threats. Public Health disease surveillance and laboratory capability are being enhanced to support these processes.

The department has a web-based disease reporting and analysis system (Merlin) in its 67 county health departments and each state laboratory. Access to the system currently is being expanded to include private sector hospitals, clinical labs and other health care providers. The department also operates EpiCom, which provides robust primary and backup outbreak reporting systems with 24/7 statewide alert capabilities.

This plan establishes an epidemiological response that addresses surge capacity and pre-event development of specific investigation and response capabilities. Ultimately, the department will establish a system for computer-enabled surveillance and analysis that will integrate human biological reporting, chemical/environmental monitoring and the presence of food- and waterborne diseases and conditions.



Preparedness requires well-defined operational relationships among clinical laboratories, resulting in efficient routing of samples and sharing of test results. Three Department of Health Basic Safety Level (BSL) 3 labs currently are networked with one BSL 3 Department of Agriculture and Consumer Services (DACs) food safety lab. This plan requires enhancements to the network of secure state labs that are capable of detecting, identifying and transporting biologic, chemical and radiologic threat agents. The department has established relationships with community hospital Level A labs that, among other things, provide laboratorian training in the recognition of biologic agents. The overarching goal is the establishment of a larger, operational consortium of public health, community, hospital-based, food testing, veterinary and environmental testing laboratories (and other clinical laboratories) to participate in the national Laboratory Response Network.

OBJECTIVE 3.1 LABORATORY CAPACITY

Develop and implement a statewide capacity to provide rapid and effective laboratory services (i.e., delivery, analysis and reporting) in support of the response to public health threats and emergencies including chemical, radiological and biologic terrorism and other infectious disease outbreaks.

STRATEGY 3.1A By 8/30/07, establish a network of secure laboratories in Florida capable of detecting, identifying and transporting biologic, chemical and radiologic threat agents.

OBJECTIVE 3.2 DISEASE SURVEILLANCE, INVESTIGATION AND RESPONSE CAPACITY

Ensure the capability to rapidly detect and mitigate a disease outbreak through a highly functioning disease surveillance, investigation and response system.

STRATEGY 3.2A By 8/30/07, a statewide system will be in place to support public and private providers and laboratories in the mandatory reporting of diseases, disease outbreaks and other pertinent disease clusters or conditions.

STRATEGY 3.2B By 8/30/05, develop and implement a system for the early identification of potential events based on epidemiologic analysis of surveillance data.

STRATEGY 3.2C By 8/30/05, develop and exercise a comprehensive epidemiologic response plan that addresses surge capacity and pre-event designation of specific investigation and response teams. This plan must identify competencies for epidemiological response in an emergency and establish minimum standards for training to assure competencies are met.

STRATEGY 3.2D By 08/30/05, in cooperation with law enforcement, identify and train at least ten department epidemiologists for mutual response to a biological event.

STRATEGY 3.2E By 8/30/07, recruit and deploy a statewide workforce of highly skilled epidemiologists to facilitate the department in meeting its surveillance and epidemiological preparedness and response objectives.

OBJECTIVE 3.3 FOOD AND WATER SAFETY

Ensure the safety of Florida's food and water supply through partnerships with DACs and the departments of Business and Professional Regulation (DBPR) and Environmental Protection (DEP). These partnerships must foster joint investigations, laboratory analysis and data sharing in the event of a suspected food- or waterborne illness or contamination of the food or water supply.



- STRATEGY 3.3A** By 8/30/06, develop and standardize laboratory equipment and training for food analysis protocols.
- STRATEGY 3.3B** By 8/30/06, establish and provide competency-based training to cross-discipline response teams for response to biological and chemical events. These teams will include, at a minimum, representatives from the health, agriculture and environmental disciplines.
- STRATEGY 3.3C** By 8/30/07, implement an electronic surveillance and analysis system that integrates inter-agency detection, investigation and response to chemical, food- and waterborne diseases and conditions.

Goal 4 Efficient health care communications system that is interoperable with other responders in Florida

In a public health emergency, rapid and effective response is dependent on effective communication among public health departments, pre-hospital EMS, institutional and office-based health care providers and facilities, law enforcement, emergency management, public officials and others. Meeting this goal assures that the health care community will have both voice and data connectivity before, during and after an event when routine communications methods may be compromised.

This plan requires secure primary and back up voice and electronic means of exchanging clinical, laboratory, environmental and other public health information in standard formats on a 24/7 basis. It also addresses the ongoing protection of critical data and information systems to maintain the privacy of an individual’s medical records as required by federal and state law.

OBJECTIVE 4.1 COMMUNICATION CONNECTIVITY

Ensure effective communications connectivity among public health departments, health care facilities and organizations, law enforcement organizations, emergency management, public officials and others.

- STRATEGY 4.1A** By 8/30/07, 90% of key stakeholders will be able to electronically send and receive health alerts and critical event data on a 24/7 basis.

OBJECTIVE 4.2 COMMUNICATIONS SYSTEM BACK UP

Ensure continuous communications connectivity for voice and data that is interoperable among public health departments, health care facilities and organizations, law enforcement organizations, emergency management, public officials and others.

- STRATEGY 4.2A** By 8/30/07, 95% of the participants in public health emergency response will have available to them a method of emergency communication that backs up standard telecommunications (telephone, e-mail, Internet, etc.).
- STRATEGY 4.2B** By 8/30/07, ensure that access to 100% of department mission-critical information systems and processes can be re-established in the event of a system failure within time frames identified in the department Continuity of Operations Plan.



OBJECTIVE 4.3 INFORMATION SECURITY AND CONFIDENTIALITY

Ensure the on-going protection of critical health data and information before, during and after an event of public health significance.

STRATEGY 4.3A By 8/30/07, ensure a single, secure point of access to all data and information systems that provides intrusion detection and network monitoring.

STRATEGY 4.3B By 8/30/07, integrate information security and confidentiality standards into all Comprehensive Emergency Management Plan standard annexes.

OBJECTIVE 4.4 ELECTRONIC EXCHANGE OF DATA

Ensure the secure electronic exchange of clinical, laboratory, environmental and other public health information in standard formats between public health partners' computer systems.

STRATEGY 4.4A By 8/30/07, all key public health data will be securely exchanged in standard formats based upon established national standards.

Goal 5 Health care system capable of responding to events of public health significance resulting in mass casualties

In cooperation with the health care community, the department is taking steps to ensure the health care system's ability to respond to outbreaks or events that result in mass casualties and/or mass fatalities. This initiative requires that all components of the health care system be prepared to respond to a surge in service demand.

The state's Mass Casualty Plan is the umbrella for the health care response to events involving mass casualties and/or fatalities. Planning, equipping, training and exercising the health components of this mass casualty plan are the priorities for Florida's preparedness efforts. Subject matter experts from the health care community have partnered to develop state standards for the health care workforce, pre-hospital, hospital, mental health and mass fatality response to the increased demand for services in an event of public health significance.

OBJECTIVE 5.1 HEALTH CARE WORKFORCE SURGE CAPACITY

In urban areas, establish a response system that facilitates the immediate deployment of 250 or more additional patient care personnel per million peak population. In rural areas, 125 or more additional patient care personnel per million peak population are required.

STRATEGY 5.1A By 8/30/07, develop local and regional organizations of qualified "reserve" health care professionals who can be deployed in the event of a public health emergency.

STRATEGY 5.1B By 8/30/07, implement a system that allows the rapid and accurate credentialing and supervision of clinicians responding to a terrorist incident who do not normally work in health care facilities.



OBJECTIVE 5.2 PRE-HOSPITAL SURGE CAPACITY

Develop a mutual aid plan for upgrading and deploying EMS units to jurisdictions they do not normally cover in response to a mass casualty incident due to terrorism or any other disaster. This plan must ensure the capability of providing EMS daily coverage for at least 500 adult and pediatric patients per million population.

STRATEGY 5.2A By 8/30/07, assure that mutual aid agreements for EMS services are in place at the local, county, regional and state levels.

STRATEGY 5.2B By 8/30/07, develop and exercise programs for the activation of qualified "reserve" personnel in the event of a public health emergency.

OBJECTIVE 5.3 HOSPITAL SURGE CAPACITY

In preparation for a biological, chemical, radiological or explosive terrorist incident, establish a system capable of providing triage, treatment and disposition for 500 adult and pediatric patients per million population with acute illness or trauma that requires hospitalization.

STRATEGY 5.3A Require that each county CEMP develop a plan and the relationships required to ensure the triage, treatment and disposition of 500 adult and pediatric patients per million population with acute illness or trauma that requires hospitalization.

STRATEGY 5.3B By 8/30/07, enhance statewide trauma care capacity to support the response to a mass casualty incident due to terrorism. This plan will ensure the capability of providing trauma care to at least 50 severely injured adult and pediatric patients per million population per day.

OBJECTIVE 5.4 MENTAL HEALTH SURGE CAPACITY

For those exposed to biological, chemical, radiological or explosive means of terrorism, establish a system that makes available a range of acute psychosocial interventions and longer-term mental health services to adult and pediatric clients and health care workers. This system must accommodate 5,000 clients per million of the exposed population.

STRATEGY 5.4A By 8/30/07, design, implement and exercise mental health surge capacity plans statewide.

STRATEGY 5.4B By 8/30/07, establish disaster mental health team (DMHT) capability in each region.

OBJECTIVE 5.5 MORTUARY SURGE CAPACITY

In partnership with Florida funeral directors and medical examiners, develop disaster mass fatality capability.

STRATEGY 5.5A By 8/30/05, develop a mass fatality plan that fully integrates into the statewide mass casualty and hospital response plans.

STRATEGY 5.5B By 8/30/07, establish and equip a portable mortuary for response to mass fatalities.



Goal 6 Integrated all-hazards planning, assessment and response system

This Public Health Preparedness Strategic Plan establishes leadership to direct, coordinate and evaluate ongoing interagency public health preparedness collaboration. Leadership will assure the systematic integration of preparedness planning, assessment and response into established health care system operations. Assuring a statewide standard for preparedness and response for public health emergencies will be accomplished through the Comprehensive Emergency Management planning processes both at the state and community levels.

OBJECTIVE 6.1 PUBLIC HEALTH PREPAREDNESS LEADERSHIP

Establishes the process for strategic leadership, direction, coordination and activities assessment to ensure state and local readiness and interagency collaboration and preparedness for bioterrorism, other outbreaks of infectious disease and other public health threats and emergencies.

STRATEGY 6.1A By 8/30/04, establish and enhance an integrated process for setting goals and objectives, implementing work plans with timelines, monitoring progress and allocating resources.

STRATEGY 6.1B By 8/30/04, integrate all-hazards planning with Florida's domestic security program through participation in local and state task forces and workgroup activities.

OBJECTIVE 6.2 PREPAREDNESS PLANNING

Develop, exercise and evaluate a comprehensive public health emergency preparedness and response plan.

STRATEGY 6.2A By 8/30/07, integrate assessments of public health system capacities related to disease outbreaks and other public health threats and emergencies into the community health planning process.

STRATEGY 6.2B By 8/30/07, 85% of county CEMPs' Health and Medical Annexes (ESF 8) will include a standard data set.

Department: Corrections

EOG Number: B2004-0573

Problem Statement: The Department of Corrections (DOC) is projecting a deficit of \$10,701,423 in the Health Services program for fiscal year 2003-04. This deficit is due to a combination of factors which include increased utilization, inflationary increases, shortage of trained health care professionals, and hospital costs at private prisons that exceed the contractual cap for those expenditures. Contracts maintained by the Correctional Privatization Commission for the operation of the five private prisons contain limits on the financial liability to the contractors associated with each episode of hospitalization. The department becomes liable for the costs above these caps. For FY 2003-2004, these additional costs are projected to be \$2 million. DOC receives no specific appropriation for such expenditures. To address the health services deficit, the department is requesting a series of transfers of projected relatively small surpluses from the Security and Institutional Operations, Community Corrections and Education Programs for the current fiscal year. The primary source of the surplus funds is in the Salaries and Benefits category and arises from vacancies attributable to recruitment time and employee turnover. DOC states that these transfers will have a minimal impact on the department's public safety operations. Also, the department is projecting a deficit in the Salaries and Benefits category in Education and Programs and is requesting the transfer of \$487,467 from within the program to cover this deficit.

The department is requesting a transfer within the Health Services program of \$5,179,449 from the Salaries and Benefits category to the Inmate Health Services category. The requested transfers from other programs from the General Revenue Fund are summarized as follows:

Security and Institutional Operations -	(\$4,912,412)
Community Corrections -	(\$4,495,334)
Education and Programs -	(\$1,293,677)
Inmate Health Services -	\$10,701,423

In addition, DOC is requesting a transfer in the Operating Trust Fund of \$1,134,396 from the Salaries and Benefits category to the Expenses category to cover a deficiency in the Probation Supervision budget entity. This deficiency was caused by the transfer of General Revenue Fund budget authority in the Expenses category in the Community Corrections program of \$2,013,516 to aid in alleviating the Health Services program deficit.

Approval of this amendment will allow the department to continue to provide an appropriate level of health care services to inmates. If this budget amendment is not approved, it would impede the department's ability to meet its financial obligations and could possibly compromise the delivery of health care services.

*Legislative Budget Commission Meeting
May 26, 2004*

Agency Request: The Department of Corrections is requesting to transfer surplus budget authority between various budget entities and categories in various programs to cover a projected deficit in the Health Services program, in the Salaries and Benefits category in the Education and Programs program and in the Expense category in the Probation Supervision budget entity as outlined below:

	Security and Inst. Operations	Community Corrections	Education and Programs	Inmate Health Services	Total
General Revenue Fund					
Transfer from:					
Salaries and Benefits	(2,188,524)	(2,402,396)		(5,179,449)	(9,770,369)
Expenses		(2,013,516)	(1,410,990)		(3,424,506)
Food Products/Services	(407,270)	(24,937)			(432,207)
Contracted Service			(370,154)		(370,154)
Overtime	(2,315,447)				(2,315,447)
Salary Incentives		(14,955)			(14,955)
Electronic Monitor		(39,530)			(39,530)
State Inst. Claims	(1,171)				(1,171)
Sub-total	(4,912,412)	(4,495,334)	(1,781,144)	(5,179,449)	(16,368,339)
Transfer to:					
Salaries and Benefits			487,467		487,467
Expenses				814,248	814,248
Inmate Health Svcs				11,426,812	11,426,812
Drugs				3,639,812	3,639,812
Sub-total			487,467	15,880,872	16,368,339
Grand Total	(4,912,412)	(4,495,334)	(1,293,677)	10,701,423	0
Operating Trust Fund					
Transfer from:					
Salaries		(1,134,396)			(1,134,396)
Transfer to:					
Expenses:		1,134,396			1,134,396
Total:		0			0

Governor's Recommendation: Recommend approval to transfer \$10,701,423 of General Revenue Fund budget authority and \$1,134,396 of Operating Trust Fund budget authority from various programs to cover deficits in Health Services and in the Education and Programs' Salaries and Benefits category.

Commission Staff Comments:
SENATE: Recommend approval as recommended by the Governor's Office.
HOUSE: Pending.

Senate Subcommittee: Criminal Justice
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House Subcommittee: Public Safety Appropriations
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Line Item No.	Budget Entity / Fund / Appropriation Category Title		REQUESTED BY AGENCY	RECOMMENDED BY GOVERNOR	APPROVED BY THE LEGISLATIVE BUDGET COMMISSION
	LAS/PBS Account Number	CF	Appropriation	Appropriation	Appropriation
CORRECTIONS					
	General Revenue Fund Program: Health Services Inmate Health Services				
	Salaries and Benefits				
775	70251000-010000-00-1000		(5,179,449)	(5,179,449)	
	Expenses				
777	70251000-040000-00-1000		814,248	814,248	
	Inmate Health Services				
781	70251000-104017-00-1000		11,426,812	11,426,812	
	General Drugs				
782	70251000-104530-00-1000		2,120,449	2,120,449	
	Psychotropic Drugs				
783	70251000-104540-00-1000		841,936	841,936	
	Treatment of Inmates with Infectious Diseases				
	Infectious Diseases Drugs				
789	70252000-104550-00-1000		677,427	677,427	

Line Item No.	Budget Entity / Fund / Appropriation Category Title LAS/PBS Account Number	CF	REQUESTED BY AGENCY Appropriation	RECOMMENDED BY GOVERNOR Appropriation	APPROVED BY THE LEGISLATIVE BUDGET COMMISSION Appropriation
CORRECTIONS					
	General Revenue Fund				
	Program: Security and Institutional Operations				
	Adult and Male Custody Operations				
643	Salaries and Benefits 70031100-010000-00-1000		(2,188,524)	(2,188,524)	
650	Food Services 70031100-102025-00-1000		(350,679)	(350,679)	
655	State Institutional Claims 70031100-103612-00-1000		(1,171)	(1,171)	
	Male Youthful Offender				
680	Overtime 70031300-102331-00-1000		(228,144)	(228,144)	
	Specialty Correctional Institution Operations				
690	Overtime 70031400-102331-00-1000		(1,444,087)	(1,444,087)	
	Reception Center Operations				
699	Overtime 70031500-102331-00-1000		(481,609)	(481,609)	
698	Food Service 70031500-102025-00-1000		(56,591)	(56,591)	

Line Item No.	Budget Entity / Fund / Appropriation Category Title LAS/PBS Account Number	REQUESTED BY AGENCY	RECOMMENDED BY GOVERNOR	APPROVED BY THE LEGISLATIVE BUDGET COMMISSION
		CF	Appropriation	Appropriation
CORRECTIONS				
	Public Service Worksquad & Work Release Transition			
709	Overtime 70031600-102331-00-1000	(161,607)	(161,607)	
	General Revenue Fund			
	Program: Community Corrections			
	Probation Supervision			
740	Salaries and Benefits 70051000-010000-00-1000	(2,402,396)	(2,402,396)	
742	Expenses 70051000-040000-00-1000	(2,013,516)	(2,013,516)	
745	Salary Incentive Payments 70051000-103290-00-1000	(14,955)	(14,955)	
	Community Control Supervision			
756	Electronic Monitoring 70052000-103300-00-1000	(39,530)	(39,530)	
	Community Facility Operations			
773	Food Products 70056000-070000-00-1000	(24,937)	(24,937)	
	Operating Trust Fund			
	Community Facility Operations			
771	Salaries and Benefits 70056000-010000-00-2510	(1,134,396)	(1,134,396)	

Line Item No.	Budget Entity / Fund / Appropriation Category Title LAS/PBS Account Number	CF	REQUESTED BY AGENCY Appropriation	RECOMMENDED BY GOVERNOR Appropriation	APPROVED BY THE LEGISLATIVE BUDGET COMMISSION Appropriation
CORRECTIONS					
742	Probation Supervision Expenses 70051000-040000-00-2510		1,134,396	1,134,396	
General Revenue Fund Program: Education and Programs Adult Substance Abuse Protection, Eval. & Treat. Svs.					
790	Salaries and Benefits 70450100-010000-00-1000		110,325	110,325	
795	Basic Education Skills Salaries and Benefits 70450200-010000-00-1000		207,876	207,876	
797	Expenses 70450200-040000-00-1000		(808,990)	(808,990)	
802	Adult Offender Trans., Rehab. & Support Salaries and Benefits 70450300-010000-00-1000		169,266	169,266	
804	Expenses 70450300-040000-00-1000		(602,000)	(602,000)	
805	Contracted Services 70450300-100777-00-1000		(370,154)	(370,154)	

Department: Corrections

EOG Number: B2004-0580

Problem Statement: The department has incurred various costs associated with the delivery of human resource services due to delays in implementation of the human resource outsourcing initiative. The department has used Other Personal Services (OPS) resources as well as regular full time equivalent (FTE) positions to cover this workload, which consisted of the following:

- Processing 25,000 manual timesheets every two weeks including mailing and filing
- Entering leave data and distributing statements
- Maintaining internal databases to track applicant flow, drug testing, disciplinary actions, etc.
- Recruiting certified officers
- Collecting supplemental applications and other documents
- Performing background checks
- Maintaining personnel files including terminated employees
- Payroll and benefits administration
- Performance evaluations

The resultant deficiency in the OPS category was addressed using the department's 5-day amendment authority (#DC-04-044), requesting a transfer of funds from the Expense category to the OPS category on February 6, 2004; therefore, this request is for the Salaries and Benefits and the Expenses categories only.

Agency Request: The Department of Corrections requests a reduction of \$2,966,806 in the Transfer to DMS-HR Services category, an increase of \$1,356,140 in the Salaries and Benefits category and an increase of \$1,610,666 in the Expenses category in the General Revenue Fund within the department's administration program.

Governor's Recommendation: Recommend approval to transfer \$2,966,806 of General Revenue Fund budget authority from the Transfer to DMS-Human Resource Services category to the Salaries and Benefits and Expenses categories to offset the costs incurred for the delivery of human resource services which have not been fully outsourced.

Commission Staff Comments:

SENATE: Recommend approval as recommended by the Governor's Office.

HOUSE: Pending.

*Legislative Budget Commission Meeting
May 26, 2004*

<i>Senate Subcommittee:</i> Criminal Justice	<i>House Subcommittee:</i> Public Safety Appropriations
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Line Item No.	Budget Entity / Fund / Appropriation Category Title LAS/PBS Account Number		REQUESTED BY AGENCY	RECOMMENDED BY GOVERNOR	APPROVED BY THE LEGISLATIVE BUDGET COMMISSION
		CF	Appropriation	Appropriation	Appropriation
CORRECTIONS					
	Program: Department Administration				
	Business Service Centers				
	General Revenue Fund:				
628	Salaries and Benefits 70010100-010000-00-1000		1,356,140	1,356,140	
629	Expenses 70010100-040000-00-1000		164,118	164,118	
	Executive Direction and Support Svcs.				
633	Expenses 70010200-040000-00-1000		1,446,548	1,446,548	
638	Transfer to DMS-HR Services 70010200-107040-00-1000		(2,966,806)	(2,966,806)	

Department: Military Affairs

EOG Number: B2005-0023

Problem Statement: Since 1997, the Department of Military Affairs (DMA) has contracted for the development and administration of the federally funded About Face and Forward March programs through the Florida National Guard armories located throughout the state. The About Face program provides after school and summer activities for youth between the ages of 13 and 17 who are children of Temporary Assistance to Needy Families (TANF) clients. The Forward March program assists TANF recipients in building skills necessary to find and maintain employment. The Cooperative Agreement Trust Fund in DMA has been used in past years to fund these two programs.

During the 2004 legislative session, bills were filed to create the Welfare Transition Trust Fund in those agencies that receive TANF funds, in order to more efficiently track the receipts and expenditure of federal funds. The Welfare Transition Trust Fund was created in the Department of Children and Families and Department of Health, but Senate Bill 872, creating this fund in DMA, failed to pass. Specific Appropriation 2766 of the Fiscal Year 2004-2005 General Appropriations Act funds both of these programs in the DMA from the Welfare Transition Trust Fund.

Agency Request: Since the Welfare Transition Trust Fund was not created in DMA, a budget amendment is necessary to transfer \$4,300,000 in spending authority from the Welfare Transition Trust Fund to the Cooperative Agreement Trust Fund to enable DMA to continue support for the About Face and Forward March programs.

Governor's Recommendation: Recommend approval to transfer \$4,300,000 in Specific Appropriation 2766 from the Welfare Transition Trust Fund to the Cooperative Agreement Trust Fund, effective July 1, 2004.

Commission Staff Comments:

SENATE: Recommend approval as recommended by the Governor's Office.

HOUSE: Pending.

Senate Subcommittee: Transportation & Economic Development
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House Subcommittee: Transportation & Economic Development
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Line Item No.	Budget Entity / Fund / Appropriation Category Title		REQUESTED BY AGENCY	RECOMMENDED BY GOVERNOR	APPROVED BY THE LEGISLATIVE BUDGET COMMISSION
	LAS/PBS Account Number	CF	Appropriation	Appropriation	Appropriation
MILITARY AFFAIRS					
2766	Program: Readiness and Response <u>Fed/State Cooperative Agreements</u> Cooperative Agreement Trust Fund Special Category: G/A - Wages Contracting Military Affairs 62050500-100801-00-2039		4,300,000	4,300,000	
2766	Welfare Transition Trust Fund Special Category: G/A - Wages Contracting Military Affairs 62050500-100801-00-2401		(4,300,000)	(4,300,000)	

Department: Department of the Lottery

EOG Number: B2004-0553

Problem Statement: The Florida Department of Lottery is requesting increases in budget authority for the Instant Ticket Purchase and the Online Games Contract appropriation categories.

The appropriation for instant ticket purchases for Fiscal Year 2003-2004 is \$27,600,000 which was based on the February 24, 2003, Revenue Estimating Conference (REC) sales projection of \$1,170,000,000. The current vendor is compensated at a rate of 2.3% of sales. The appropriation includes funding for instant games property licenses. Sales projections from the February 23, 2004, REC were increased by \$144,200,000, for a total sales projection of \$1,314,200,000. Since February, actual sales have continued to be even higher than those projected by the REC. Based on actual sales and the games to be launched during the remainder of the fiscal year, total sales from instant ticket purchases are estimated to be \$1,346,087,235. The increase in sales will result in an additional \$45 million to be transferred to the Educational Enhancement Trust Fund. Because of increased sales, an additional \$4,050,000 is needed to cover the remaining instant ticket purchase obligations through June 30, 2004. To cover the potential for sales to exceed current projections, the additional amount of budget authority being requested has been adjusted to \$4,250,000. This should preclude the need for additional budget amendments this fiscal year.

The appropriation for the online games contract for Fiscal Year 2003-2004 is \$31,948,032 which was based on the February 24, 2003, REC sales projection of \$1,657,600,000. The vendor is compensated at a rate of 1.85% of sales, plus an incentive compensation of 1.11% of sales over \$1,580,480,000. This appropriation includes funding for data line charges for terminals over the contract base of 8,000. Sales projections from the February 23, 2004, REC increased by \$94,700,000 that will result in an additional \$37 million for transfer to the Educational Enhancement Trust Fund. Because of increased sales of on-line games, an additional \$2,834,320 is needed to cover the remaining on-line games contract obligations through June 30, 2004. To cover the potential for sales to exceed current projections, an additional amount of budget authority being requested has been adjusted to \$3,000,000. This should preclude the need for additional budget amendments this fiscal year.

Agency Request: The Florida Department of Lottery is requesting increased budget authority in the Administrative Trust Fund of \$4,250,000 for instant ticket purchases and \$3,000,000 for online games to cover remaining contractual obligations.

Governor's Recommendation: Recommend approval to increase additional budget authority in the Administrative Trust Fund in the amounts of \$4,250,000 for instant ticket purchases and \$3,000,000 for online games.

Commission Staff Comments:

SENATE: Recommend approval as recommended by the Governor's Office.

HOUSE: Pending.

Senate Subcommittee: General Government

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Line Item No.	Budget Entity / Fund / Appropriation Category Title		REQUESTED BY AGENCY	RECOMMENDED BY GOVERNOR	APPROVED BY THE LEGISLATIVE BUDGET COMMISSION
	LAS/PBS Account Number	CF	Appropriation	Appropriation	Appropriation
DEPARTMENT OF THE LOTTERY					
	Program: Lottery Operations				
	<u>Lottery Operations</u>				
	Administrative Trust Fund				
2555	Special Category - Instant Ticket Purchase 36010000-101740-00-2021		4,250,000	4,250,000	
2557	Special Category - Online Games Contract 36010000-102381-00-2021		3,000,000	3,000,000	