Trkg.	page	Bill						G	overnor Reco	ommendation		
Line	#	Ref.	Fund	BACT	SUB	DESCRIPTION	FY 2012	FY 2013	FY 12-13	FY 2014	FY 2015	FY 14-15
	Page				Fund							
						TOTAL - NET IMPACT	(518,448)	(778,144)	(1,296,591)	(793,640)	(882,174)	(1,675,815
			GF			General Fund	(503,122)	(603,018)	(1,106,140)	(759,316)	(792,165)	(1,551,481
			HCAF			Health Care Access Fund	(15,346)	(175,145)	(190,492)	(34,344)	(90,029)	(124,373
			SGSR			State Government Special Revenue Fund	0	0	0	0	0	0
			TANF			Federal TANF	20	20	40	20	20	40
			DED			Statutory Funds	0	0	0			
			212				Ŭ	Ű	Ŭ			
43	14					Operating Budget Reduced: Central Office	(3,000)	(3,000)	(6.000)	(3,000)	(3,000)	(6,000
44						Reduce Central Office operations (not allocated)	(0,000)	(0,000)	(0,000)	(0,000)	(0,000)	(0,000)
45						GF TOTAL	(3,000)	(3,000)	(6,000)	(3,000)	(3,000)	(6,000
46			GF	11		Central Office Operations (not allocated)	(4,615)	(4,615)	(9,230)	(4,615)	(4,615)	(9,230
47			GF	REV1		FFP Admin. Impact @ 35%	1,615	1,615	3,230	1,615	1,615	3,230
48			01				1,010	1,010	0,200	1,010	1,010	0,200
49	16					Restructure Licensing Fees	(585)	(585)	(1,170)	(585)	(585)	(1,170
						This option restructures DHS's funding mechanism for licensing activities to move to a more enterprise model which more fully funds actual costs of licensing by licensed programs rather than the general fund (GF). The option increases licensing fees to more fully cover actual costs and redirects the collection and appropriation of licensing fees from the GF to the state government special revenue fund (SGSR).						
50							(70.7)	(70.7)	(( (==))	(7.7.7)	(707)	· · · ·
51						GF TOTAL	(585)	(585)	(1,170)	(585)	(585)	(1,170
52						SGSR TOTAL	0	0	0	0	0	0
53			GF	11		Move of Licensing Funding from GF	(3,000)	(3,000)	(6,000)	(3,000)	(3,000)	(6,000
54			GF	REV1		FFP Admin. Impact @ 35%	315	315	630	315	315	630
55			GF	REV2		Move of Licensing Fee Revenue from GF to SGSR	2,100	2,100	4,200	2,100	2,100	4,200
56			SGSR	11		Move of Licensing Funding to SGSRF from GF	3,000	3,000	6,000	3,000	3,000	6,000
57			SGSR	REV2	170	Move of Licensing Fee Revenue from GF to SGSRF	(2,100)	(2,100)	(4,200)	(2,100)	(2,100)	(4,200
58 59			SGSR	REV2	170	Licensing Fee Increase - Increase Rev to SGSRF	(900)	(900)	(1,800)	(900)	(900)	(1,800
60	19					Licensing Fees for Background Studies	(650)	(650)	(1,300)	(650)	(650)	(1,300
						This option restructures DHS's background study fee schedule such that programs directly licensed by DHS will be charged \$20 for each background study. This is the same amount charged to other entities requiring a background study from DHS. This change will more fully address the actual costs of these licensing activities and reduce pressure on the General Fund.						
61						destrates and reduce process on the Constant and.						
62						GF TOTAL	(650)	(650)	(1,300)	(650)	(650)	(1,300
63						DED TOTAL	0	0	0	0	0	(1,000
64	+		GF	11		Licensing - Reduction in Appropriation for Bckgrd Studies	(1,000)	(1,000)	(2,000)	(1,000)	(1,000)	(2,000
65			GF	REV1		FFP Admin. Impact @ 35%	350	350	700	350	350	700
66			DED	11	SR	Licensing - Special Revenue Expenditure on Bckgrd Study	1,000	1,000	2,000	1,000	1,000	2,000
67			DED	11	SR	Licensing - Special Revenue from Bckgrd Studies	(1,000)	(1,000)	(2,000)	(1,000)	(1,000)	(2,000

Trkg.	page	Bill						G	overnor Reco	ommendation		
Line	#	Ref.	Fund	BACT	SUB	DESCRIPTION	FY 2012	FY 2013	FY 12-13	FY 2014	FY 2015	FY 14-15
68												
69	21					Adoption / Relative Custody Assistance	5,770	7,029	12,799	7,029	7,029	14,058
						This proposal changes the Adoption Assistance and Relative						
						Custody Assistance appropriations to reflect current estimates						
						for this biennium. Sufficient base level funding for these						
70						programs was not provided last session.						
70 71						GF TOTAL	5,770	7,029	12,799	7,029	7,029	14,058
72			GF	45		Adoption Assistance	6,571	8,016	14,587	8,016	8,016	16,032
73			GF	45		Relative Custody Assistance	(801)	(987)	(1,788)	(987)	(987)	(1,974)
74			0.	10			(001)	(001)	(1,100)	(001)	(007)	(1,07.1)
								100		(00	(00	
75	23					Fund Growth for MN Food Assistance Program	333	408	741	408	408	816
						Increase funding to Minnesota Food Assistance Program						
76						(MFAP) Serves approx. 300 people.						
77						GF TOTAL	333	408	741	408	408	816
78			GF	47		Children & Economic Support Grants (fund partial growth)	333	408	741	408	408	816
79												
80	24					CCSA for Vulnerable Children & Adults	(10,000)	(12,000)	(22,000)	(12,000)	(12,000)	(24,000)
							(10,000)	(,,	(,,	(12,000)	(12,000)	(,,
						This proposal reduces Children and Community Services Act						
						(CCSA) funds and remaining funds in the Act shall be targeted to						
						serve core functions to support vulnerable children and adults.						
81												
82						GF TOTAL	(10,000)	(12,000)	(22,000)	(12,000)	(12,000)	(24,000)
83			GF	46		Children and Community Services Grant	(10,000)	(12,000)	(22,000)	(12,000)	(12,000)	(24,000)
84												
85	25					Reduce MFIP Consolidated Fund	(14,000)	(14,000)	(28,000)	(14,000)	(14,000)	(28,000)
						This proposal reduces the Minnesota Family Investment						
						Program (MFIP) Consolidated Fund by \$14 million per year,						
86						effective January 1, 2012.						
							(1.1.000)	(4.4.000)	(00.000)	(4.4.000)	(4.4.000)	(00.000)
87 88			TANE	41		TANF TOTAL	(14,000)	(14,000) (14,000)	(28,000) (28,000)	(14,000)	(14,000)	(28,000) (28,000)
88 89			TAINE	41		Support Services Grants	(14,000)	(14,000)	(28,000)	(14,000)	(14,000)	(28,000)
90	26					Combine and Restructure EGA & EMSA	(2,290)	(2,260)	(4,550)	(2,260)	(2,260)	(4,520)
_	-		1		1	Funding for Emergency General Assistance (EGA) and	( ) <b>/</b>	( ) - 7	( ) )	( ,		( )= ••)
						Emergency Minnesota Supplemental Aid (EMSA) is combined						
91						into one program, and reduced						
91			+			GF TOTAL	(2,290)	(2,260)	(4,550)	(2,260)	(2,260)	(4,520)
92		-	GF	23		General Asst. Grants (EGA)	(1,200)	(1,160)	(2,360)	(1,160)	(1,160)	(2,320)
94			GF	24		MSA Grants (EMSA)	(1,100)	(1,100)	(2,200)	(1,100)	(1,100)	(2,200)
95			GF	11	1	Finance & Management (MAXIS)	10	0	10	0	0	0
96					1			-				

Trkg.	page	Bill						G	overnor Reco	ommendation		
Line	#	Ref.	Fund	BACT	SUB	DESCRIPTION	FY 2012	FY 2013	FY 12-13	FY 2014	FY 2015	FY 14-15
97	27					End Child Support Incentive Grant	(3,355)	(3,355)	(6,710)	(3,355)	(3,355)	(6,710)
						This proposal eliminates the state funded county child support						
98						incentive grants.						
99						GF TOTAL	(3,355)	(3,355)	(6,710)	(3,355)	(3,355)	(6,710)
100			GF	44		Child Support Grants	(3,355)	(3,355)	(6,710)	(3,355)	(3,355)	(6,710)
101												
102	28					End State Community Action Grants	(3,900)	(3,900)	(7,800)	(3,900)	(3,900)	(7,800)
102	20						(3,900)	(3,900)	(7,000)	(3,900)	(3,900)	(7,000)
103						This proposal eliminates the state Community Action Grants.						
104						GF TOTAL	(3,900)	(3,900)	(7,800)	(3,900)	(3,900)	(7,800)
105			GF	47		Children & Economic Support Grants	(3,900)	(3,900)	(7,800)	(3,900)	(3,900)	(7,800)
106												
107	29					End State FAIM Grants	(492)	0	(492)	(492)	0	(492)
107	20					This proposal eliminates funding for the Family Assets for	(402)	Ű	(+52)	(432)	Ű	(432)
108						Independence in Minnesota (FAIM) program.						
109						GF TOTAL	(492)	0	(492)	(492)	0	(492)
110			GF	47		Children & Econ. Support Grants	(492)	0	(492)	(492)	0	(492)
111												
112	30					Child Care Assistance Program Changes	(799)	(5,956)	(6,755)	(8,047)	(8,004)	(16,051)
						This proposal changes the Child Care Assistance Programs (CCAP) to support program simplification, address program integrity and improve the quality of child care in unregulated child care settings. Effective dates vary by proposal.						
113												
114						GF TOTAL	(799)	(5,956)	(6,755)	(8,047)	(8,004)	(16,051)
115			GF	22		MFIP Child Care	(554)	(3,270)	(3,824)	(4,396)	(4,360)	(8,756)
116			GF	42		BSF Child Care	(413)	(2,686)	(3,099)	(3,651)	(3,644)	(7,295)
117			GF	11		Finance & Management (MAXIS)	168	0	168	0	0	0
118												
119	33					BSF Child Care Assistance Underspending	(5,000)	0	(5,000)	0	0	0
						This proposal reduces spending in the Basic Sliding Fee Child Care Assistance Program in SFY 2012 by the amount estimated						
120						to be underspent in calendar year 2010.						
121						GF TOTAL	(5,000)	0	(5,000)	0	0	0
122						DED TOTAL	0	0	0	0	0	0
123			GF			BSF Child Care Appropriation	(5,000)	0	(5,000)	0	0	0
124			DED		Fed	BSF Child Care	5,000		5,000			-
125 126			DED	REV	Fed	BSF Child Care - CCFDF Spending	(5,000)	0	(5,000)	0	0	0

Trkg.	page	Bill				G	overnor Reco	mmendation		
Line	#	Ref. Fu	nd BACT SUB	DESCRIPTION	FY 2012	FY 2013	FY 12-13	FY 2014	FY 2015	FY 14-15
127	34			Increase Child Support Cost Recovery Fee	(519)	(1,100)	(1,619)	(1,100)	(1,100)	(2,200)
				The child support cost recovery fee would be doubled from 1% to 2% of applicable child support collections effective January 1, 2012.						
128 129				GF TOTAL	(519)	(1,100)	(1,619)	(1,100)	(1,100)	(2,200)
129				DED TOTAL	(319)	(1,100)	(1,019)	(1,100)	(1,100)	(2,200)
130		0	GF 11	Finance & Management (PRISM) one time charge	31	0	31	0	0	0
132			GF 11	Finance & Management (PRISM)	(550)	(1,100)	(1,650)	(1,100)	(1,100)	(2,200)
133				v Finance & Management (PRISM)	550	1,100	1,650	1,100	1,100	2,200
134				v Fee Revenue Increase (state share)	(550)	(1,100)	(1,650)	(1,100)	(1,100)	(2,200)
135					(000)		(1,000)	(1,100)	(1)	(-,)
136	35			Liquidate SSI-IAR Carryforward Balance	(2,800)	0	(2,800)	0	0	0
137				The FY 2011 carry forward balance in the account used for advocacy and outreach efforts to help people access the Supplemental Security Income (SSI) program would be eliminated.						
138				GF TOTAL	(2,800)	0	(2,800)	0	0	0
139		(	F REV2	Transfer Balance to General Fund	(2,800)	0	(2,800)	0	0	0
140										
141	36			Match Support Services Expenditures	(500)	(500)	(1,000)	(500)	(500)	(1,000)
142				This proposal uses existing state spending in the Child Care Assistance Program (CCAP) to leverage additional federal Food Stamp Employment and Training (FSET) program funds.						
143				GF TOTAL	(500)	(500)	(1,000)	(500)	(500)	(1,000)
144		(	6F 47	FSET Revenue Enhancement	(500)	(500)	(1,000)	(500)	(500)	(1,000)
145						· · ·	,			
146	37			TANF Refinancing MFIP Child Care	0	0	0	0	0	0
147				Refinances TANF funds in the MFIP Child Care Assistance Program to achieve general fund savings (includes \$20K refinancing for MDH)						
148				GF TOTAL	(14,020)	(14,020)	(28,040)	(14,020)	(14,020)	(28,040)
149				TANF TOTAL	14,020	14,020	28,040	14,020	14,020	28,040
150				DED TOTAL	0	0	0	0	0	0
151		TAT	-	Refinance Child Care with TANF Funding	14,020	14,020	28,040	14,020	14,020	28,040
152		(	GF 22	MFIP/TY Child Care	(14,020)	(14,020)	(28,040)	(14,020)	(14,020)	(28,040)
153		DE	D REV Fed	Transfer from TANF to CCDF	(14,020)	(14,020)	(28,040)	(14,020)	(14,020)	(28,040)
154		DE	D EXP Fed	MFIP/TY Child Care; CCDF	14,020	14,020	28,040	14,020	14,020	28,040

Trkg.	page	Bill					(	Governor Reco	ommendation	Governor Recommendation								
Line	#	Ref. Fu	nd BAC	T SUB	DESCRIPTION	FY 2012	FY 2013	FY 12-13	FY 2014	FY 2015	FY 14-15							
155																		
156	39				Eliminate Delayed 1% DD Waiver Acuity	(4,481)	(4,481)	(8,962)	(4,481)	(4,481)	(8,962)							
157					Eliminates 1% DD waiver acuity increase payment that current law delays from January 1, 2009 until July 1, 2011.													
158					GF TOTAL	(4,481)	(4,481)	(8,962)	(4,481)	(4,481)	(8,962)							
159		(	6F 33	LF	MA Grants	(4,481)	(4,481)	(8,962)	(4,481)	(4,481)	(8,962)							
160						· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·											
161	40				Aging Grant Reduction	(3,600)	(3,600)	(7,200)	0	0	0							
162					Continues a reduction to CS/SD grants for FY 12-13 only & prohibits new construction of building renovation during the biennium.													
163					GF TOTAL	(3,600)	(3,600)	(7,200)	0	0	0							
164		(	GF 53	;	CS/SD Grants	(3,600)	(3,600)	(7,200)	0	0	0							
165																		
166	41				Managing Elderly Waiver and AC Programs	(12,312)	(13,826)	(26,138)	(13,949)	(13,779)	(27,728)							
167					Reduce expenditures for EW and AC programs: reduce payments for lowest need participants and expand the definition of Case Mix L, as well as reduce spending in customized living (CL) and 24 hr. customized living.													
168					GF TOTAL	(12,312)	(13,826)	(26,138)	(13,949)	(13,779)	(27,728)							
169		(	GF 33	LW	MA Waivers- EW E & D	(14,814)	(21,259)	(36,073)	(22,845)	(23,507)	(46,352)							
170			GF 33		MA Grants LTC Waivers	(1,613)	(1,920)	(3,533)	(2,030)	(2,047)	(4,077)							
171		(	GF 33	LF	MA Grants LTC Facilities	4,392	9,704	14,096	11,299	12,158	23,457							
172			GF 34	Ļ	AC- Expand AC apply cap	(348)	(417)	(765)	(439)	(449)	(888)							
173			6F 14		CCA- Admin	110	101	211	101	101	202							
174		(	F REV	1	Administrative FFP @ 35%	(39)	(35)	(74)	(35)	(35)	(70)							
175																		
176	44				Low Needs NF Case Mix	(8,452)	(8,915)	(17,367)	(4,655)	(188)	(4,843)							
177					Reduces the operating payment rates paid for the lowest case mix categories (PA1 and BC1) of the nursing facility case mix classification system by 25%.													
178					GF TOTAL	(8,452)	(8,915)	(17,367)	(4,655)	(188)	(4,843)							
179			GF 33	LF	MA Nursing Facilities	(8,624)	(9,081)	(17,705)	(4,821)	(354)	(5,175)							
180			GF 14		CC Administration	111	101	212	101	101	202							
181			F REV	1	Administrative FFP @ 35%	(39)	(35)	(74)	(35)	(35)	(70)							
182		(	GF 53		Aging & Adult Services grants	100	100	200	100	100	200							
183																		

Trkg.	page	Bill				Governor Recommendation							
Line	#	Ref.	Fund BA	T SUE	DESCRIPTION	FY 2012	FY 2013	FY 12-13	FY 2014	FY 2015	FY 14-15		
184	46				Reduce Certain Congregate Living Rates	(4,837)	(7,498)	(12,335)	(11,552)	(11,552)	(23,104)		
185					Services for individuals with lower needs living in congregate living arrangements will be reduced on average by 10% in FY 2012-2013 and 15% in FY 2014-2015.								
186					GF TOTAL	(4,837)	(7,498)	(12,335)	(11,552)	(11,552)	(23,104)		
187				3 LW	MA Grants DD, CADI	(5,382)	(8,073)	(13,455)	(11,964)	(11,964)	(23,928)		
188				5	Disabilities Grants	250	250	500	250	250	500		
189				4	Continuing Care Management	450	500	950	250	250	500		
190			GF 1	1	Finance & Management (MMIS)	3	0	3	0	0	0		
191			GF RE	/1	FFP on Administration @ 35%	(158)	(175)	(333)	(88)	(88)	(176)		
192													
193	48				Disability Waiver Enrollment Limits	(12,890)	(32,873)	(45,763)	(33,649)	(19,369)	(53,018)		
194					Applies growth limits for CADI, TBI, and DD waivers for FY12 and FY13. New monthly waiver limits are as follows: CADI= $60$ , TBI= 3, DD= $6$								
195					GF TOTAL	(12,890)	(32,873)	(45,763)	(33,649)	(19,369)	(53,018)		
196			GF 3	3 LW	MA LTC Waivers	(17,274)	(47,201)	(64,475)	(49,981)	(28,009)	(77,990)		
197				3 LF	MA Nursing Facilities	1,090	5,789	6,879	7,582	3,772	11,354		
198			GF 3	3 LW	MA Home Care	3,294	8,539	11,833	8,750	4,868	13,618		
199			GF 1	4	Continuing Care Management	0	0	0	0	0	0		
200			GF RE	/1	FFP on Administration @ 35%	0	0	0	0	0	0		
201													
202	50				Separate EW and NF Rates	(238)	(1,001)	(1,239)	(3,580)	(9,688)	(13,268)		
203					Removes automatic annual adjustments to EW monthly case mix caps from changes in the average nursing facility payment rates.								
203					GF TOTAL	(238)	(1,001)	(1,239)	(3,580)	(9,688)	(13,268)		
204			GF 3	3 ED	MA Basic Health Care E & D	(212)	(892)	(1,104)	(3,190)	(8,676)	(11,866)		
205				3 LW	MA LTC Waivers and Home Care	(212)	(109)	(1,104)	(3,190)	(1,012)	(1,402)		
200						(20)	(103)	(133)	(090)	(1,012)	(1,+02)		

Trkg.	page	Bill					G	overnor Reco	ommendation		
Line	#	Ref.	Fund BACT	SUB	DESCRIPTION	FY 2012	FY 2013	FY 12-13	FY 2014	FY 2015	FY 14-15
208	51				Reduce Provider Rates and Grants	(67,705)	(76,866)	(144,571)	(81,135)	(87,943)	(169,078)
					Reduces HCBS provider rates and aging and other continuing care grants by 4.5%. In addition, reduces nursing facility rates by 2%. (Customized Living is excluded from this proposal.) These rate reductions are effective July 1, 2011.						
209 210					GF TOTAL	(67,705)	(76,866)	(144,571)	(81,135)	(87,943)	(169,078)
210					GFTOTAL	(07,703)	(70,000)	(144,571)	(01,133)	(07,943)	(109,070)
211			GF 33	LW	MA LTC Waivers	(50,273)	(58,851)	(109,124)	(63,072)	(69,041)	(132,113)
212			GF 33	LF	MA LTC Facilities: 2% NF operating rate reduction	(6,840)	(7,203)	(14,043)	(7,076)	(6,852)	(13,928)
213			GF 33	LF	MA LTC Facilities: ICF	(3,461)	(3,756)	(7,217)	(3,723)	(3,689)	(7,412)
214			GF 33	ED	MA Basic Health Care E & D	(9,230)	(10,943)	(20,173)	(11,789)	(12,322)	(24,111)
215			GF 33	FC	MA Basic Health Care F & C	(16)	(17)	(33)	(17)	(17)	(34)
216			GF 33	LW	Remove MA LW interaction with Customized Living	3,732	4,369	8,101	4,605	4,553	9,158
217			GF 34		Alternative Care Grants	(1,295)	(1,486)	(2,781)	(1,527)	(1,555)	(3,082)
218			GF 55		Disabilities Grants	(1,364)	(1,540)	(2,904)	(1,670)	(1,728)	(3,398)
219			GF 53		Aging and Adult Services Grants	(922)	(1,012)	(1,934)	(1,013)	(1,013)	(2,026)
220			GF 33	LW	Interactive Effects	1,834	3,443	5,277	4,017	3,591	7,608
221			GF 14		CC Administrative costs	200	200	400	200	200	400
222			GF REV1		Administrative FFP Impact	(70)	(70)	(140)	(70)	(70)	(140)
223											
224	53				Modify Non-Rate Payments	(7,926)	(8,883)	(16,809)	(9,299)	(9,558)	(18,857)
225					Reduces or eliminates certain types of payments for nursing facilities that are separate from the operating payment rate.						
226					GF TOTAL	(7,926)	(8,883)	(16,809)	(9,299)	(9,558)	(18,857)
227			GF 33	LF	MA Nursing Facilities	(7,929)	(8,883)	(16,812)	(9,299)	(9,558)	(18,857)
228			GF 11		Finance & Management (MMIS)	3	(0,000)	3	0	(0,000)	(10,001)
229								Ŭ		Ŭ	Ŭ
230	54				NF and ICF/MR Surcharges	(22,224)	(22,366)	(44,590)	(21,513)	(21,286)	(42,799)
					Increase the Nursing facility surcharge by \$635 per year per bed effective July 1, 2011 with an additional increase of \$350 effective October 1, 2011. Increase the ICF/MR surcharge by \$2,825 per bed effective July 1, 2011 with an additional increase of \$408 effective October 1, 2011. There would also be rate increases to both the NF's and ICF/MR's.						
231											
232					GF TOTAL	(22,224)	(22,366)	(44,590)	(21,513)	(21,286)	(42,799)
233			GF REV2		MA NF Surcharge	(28,186)	(29,130)	(57,316)	(28,235)	(27,636)	(55,871)
234			GF 33	LF	NF cost for rate increase	8,898	9,728	18,626	9,620	9,248	18,868
235			GF REV2		MA ICF Surcharge	(5,667)	(5,722)	(11,389)	(5,593)	(5,593)	(11,186)
236			GF 33	LF	ICF/MR cost rate increase	2,731	2,758	5,489	2,695	2,695	5,390
237											

Trkg.	page	Bill						C	Sovernor Reco	ommendation		
Line	#	Ref.	Fund	BACT	SUB	DESCRIPTION	FY 2012	FY 2013	FY 12-13	FY 2014	FY 2015	FY 14-15
238	56					Increase MA-EPD Premium and Cost Share	0	72	72	(1,216)	(2,656)	(3,872)
						Implements an increase to premium and unearned income obligation cost sharing for MA-EPD (after MOE period has						
239						ended) and also includes technical changes to statute.						
240						GF TOTAL	0	72	72	(1,216)	(2,656)	(3,872)
241			GF	33	FC	Medical Assistance Grants	0	0	0	(1,361)	(2,722)	(4,083)
242			GF			Finance & Management (MAXIS)	0	0	0	41	0	41
243			GF	11		Finance & Management (MMIS)	0	0	0	38	0	38
244			GF	14		CC Administration	0	110	110	101	101	202
245			GF	REV1		Administrative FFP @ 35%	0	(38)	(38)	(35)	(35)	(70)
246							-	(00)	(00)	()	(00)	(1.4)
247	59					Federal Compliance: Implement Program Integrity Audits	34	(5)	29	(30)	(30)	(60)
248						Implements a number of program integrity initiatives, including some required under the federal ACA.						
249						GF TOTAL	34	(5)	29	(30)	(30)	(60)
250			GF	REV2		Medical Assistance Recoveries	(100)	(125)	(225)	(150)	(150)	(300)
251			GF			Health Care Operations Central Office	206	185	391	185	185	370
252			GF	REV1		Admin. FFP @ 35%	(72)	(65)	(137)	(65)	(65)	(130)
253												
254	61					Coverage for Dental Therapists	31	89	120	89	89	178
255						Makes advanced dental therapists and dental therapists eligible for MA reimbursement.						
256						GF TOTAL	31	89	120	89	89	178
257			GF	33	ED	MA Grants	31	89	120	89	89	178
258					LD		51	03	120	03	03	170
259	62					MA Electronic Health Record Incentives	319	86	405	82	72	154
260						Provides funding for the one-time development costs, and ongoing and administration costs, for DHS to provide a Medicaid electronic (EHR) incentive program to Minnesota providers. Beginning Janua federal government will pay EHR incentive payments to eligible Mi Medicaid hospitals and other providers to adopt and "meaningfully technology. The state must develop and implement processes to e payment of the incentives payments and conduct oversight, includ monitoring, of the payments. Through the ARRA the federal gover 90% of the state's costs for this initiative.	c health record ary 2012, the edicare and vuse" EHR ensure the proper ing auditing and					
261			1			GF TOTAL	319	86	405	82	72	154
262			GF	11		Finance & Management (ARRA-MMIS)	319	86	405	82	72	154
263			GF			Health Care Grants	0.0	0	0	0	0	0
264							5					<b>U</b>

Trkg.	page	Bill					Governor Recommendation							
Line	#	Ref.	Fund	BACT	SUB	DESCRIPTION	FY 2012	FY 2013	FY 12-13	FY 2014	FY 2015	FY 14-15		
265	64					Leverage Federal Systems Funding	900	1,600	2,500	1,600	1,600	3,200		
266						Appropriates \$2.5 million as the states share of the cost for developing an efficient eligibility determination system that can interface with the Health Insurance Exchange. The federal share of the cost of the development is 90%.								
267						GF TOTAL	900	1,600	2,500	1,600	1,600	3,200		
268			GF	11		Finance & Management (MMIS)	900	1,600	2,500	1,600	1,600	3,200		
269														
270	65					Managed Care Reforms	(23,832)	(90,934)	(114,766)	(100,737)	(99,922)	(200,659)		
						<ul> <li>Establish a clinical performance target for reducing hospital readmission rates that MCOs must meet to receive withheld payments.</li> <li>• Establish a competitive price bidding pilot project for managed care contracts for adults and children in the metro area</li> <li>This proposal reduces the maximum amount of payments that plans MCOs can use to cover non-tax administrative expenses from 6.6 percent to 5.3 percent.</li> <li>• Reduce Non-administrative payments to managed care organizations. This proposal reduces non-administrative payments to managed care organizations by 2.75 percent.</li> </ul>								
271									(					
272							(5,310)	(18,928)	(24,238)	(21,601)	(20,474)	(42,075)		
273						GF TOTAL	(18,522)	(72,006)	(90,528)	(79,136)	(79,448)	(158,584)		
274			GF	33	ED	MA Grants E & D	(3,355)	(10,934)	(14,289)	(13,040)	(14,258)	(27,298)		
275			GF	33	FC	MA Grants F & C	(12,932)	(43,082)	(56,014)	(52,022)	(62,354)	(114,376)		
276			GF	33	AD	MA Grants Adults	(2,235)	(17,990)	(20,225)	(14,074)	(2,836)	(16,910)		
277			HCAF	31		MinnesotaCare Grants	(5,310)	(18,928)	(24,238)	(21,601)	(20,474)	(42,075)		
278														
279	67					Evidenced-Based Childbirth Program	(386)	(888)	(1,274)	(1,010)	(1,203)	(2,213)		
280						Effective April 1, 2012, establishes an incentive for hospitals to develop policies and quality programs to eliminate elective inductions of labor before 39 weeks gestation, and requires reporting of induction practices for births covered in the Minnesota Health Care Programs (MHCP).								
281						HCAF TOTAL	0	0	0	0	0	0		
282						GF TOTAL	(386)	(888)	(1,274)	(1,010)	(1,203)	(2,213)		
283			GF	33	FC	MA Grants	(481)	(962)	(1,443)	(1,083)	(1,203)	(2,286)		
284			GF	11		Finance & Management (MMIS)	4	0	4	0	0	0		
285			GF	13		Health Care Administration	140	114	254	112	0	112		
286			GF	REV1		Admin FFP @ 35%	(49)	(40)	(89)	(39)	0	(39)		

Trkg.	page	Bill						G	overnor Reco	ommendation		
Line	#	Ref.	Fund	BACT	SUB	DESCRIPTION	FY 2012	FY 2013	FY 12-13	FY 2014	FY 2015	FY 14-15
288	69					Rehab Service Coverage and PA Changes	(52)	(1,018)	(1,070)	(1,029)	(1,029)	(2,058)
289						Eliminates coverage of specialized maintenance therapy (SMT) ur Health Care Programs (MHCP) effective July 1, 2011. Effective M rehabilitation services (physical therapy, occupational therapy, and language pathology) will no longer be subject to one-time service to instead require prior authorization for an episode of treatment. All will be required to submit authorizations electronically.	larch 1, 2012 d speech hresholds, but					
290						GF TOTAL	(52)	(1,018)	(1,070)	(1,029)	(1,029)	(2,058)
291			GF	33	ED	MA Grants	(642)	(1,169)	(1,811)	(1,169)	(1,169)	(2,338)
292			GF	13		Health Care Administration	20	233	253	233	233	466
293			GF	11		Finance & Management (MMIS)	577	0	577	0	0	0
294			GF	REV1		Administrative FFP @ 35%	(7)	(82)	(89)	(93)	(93)	(186)
295												
296	71					Modify Third Party Liability Processes	(70)	(70)	(140)	(70)	(70)	(140)
297						Requires providers to secure authorization or payment from third party payers prior to requesting authorization from MHCP.						
298						GF TOTAL	(70)	(70)	(140)	(70)	(70)	(140)
299			GF	13		Central Office Operations; Prior Authorizations	(108)	(108)	(216)	(108)	(108)	(216)
300			GF	REV1		Admin. FFP @ 35%	38	38	76	38	38	76
301												
302	72					Modify Communication Device Pricing	(124)	(191)	(315)	(245)	(314)	(559)
303						Modifies the payment methodology for Augmentative and Alternative Communication (AAC) systems, effective July 1, 2011.						
303						HCAF TOTAL	0	0	0	0	0	0
304		-				GF TOTAL	(124)	(191)	(315)	(245)	(314)	(559)
305		1	GF	33	ED	MA Grants E&D	(124)	(191)	(315)	(245)	(314)	(559)
307		1	0				(124)	(191)	(010)	(273)	(314)	(009)

Trkg.	page	Bill						G	overnor Reco	mmendation		
Line	#	Ref.	Fund	BACT	SUB	DESCRIPTION	FY 2012	FY 2013	FY 12-13	FY 2014	FY 2015	FY 14-15
308	73					Modify Pharmacy Reimbursement Methodology	(621)	(665)	(1,286)	(754)	(895)	(1,649)
309						Modifies the pharmacy reimbursement methodology: Eliminates the reimbursement. Effective July 1, 2011, drugs will be priced using the current Average Wholesale Price benchmark. Office-administered drugs will be reimbursed at the Average Sales administered drugs which do not yet have a reported ASP value we Hemophilia blood factor products will be reimbursed using a maxin Proposal also funds one pharmacy technician FTE to handle the a federal requirement to begin collecting rebates on drugs administer	the Wholesale Acqu Price (ASP) plus 6 ill be reimbursed at num allowable cost nticipated increase	isition Cost bench % as defined by Cl Wholesale Acquis established by the in appeals resultin	Mark rather than MS. Office- ition Cost. commissioner.			
310						GF TOTAL	(621)	(665)	(1,286)	(754)	(895)	(1,649)
311			GF	33	ED	Medical Assistance Grants E & D	(448)	(527)	(975)	(587)	(669)	(1,256)
312			GF	33	FC	Medical Assistance Grants F&C	(106)	(124)	(230)	(137)	(166)	(303)
313			GF	33	AD	Medical Assistance Grants Adults	(131)	(71)	(202)	(87)	(117)	(204)
314			GF	13		Health Care Administration	98	87	185	87	87	174
315			GF	REV1		Administrative FFP @ 35%	(34)	(30)	(64)	(30)	(30)	(60)
316												
317	7 <b>75</b>					Critical Access Dental Eligibility	(2,731)	(5,330)	(8,061)	(5,887)	(6,427)	(12,314)
318						Eliminates association with an oral health or dental education program operated by the University of Minnesota or an institution within the Minnesota State Colleges and Universities system as one of the criteria for qualifying for Critical Access Dental add-on payments.						
319						HCAF TOTAL	(603)	(2,207)	(2,810)	(2,400)	(2,504)	(4,904)
320						GF TOTAL	(2,128)	(3,123)	(5,251)	(3,487)	(3,923)	(7,410)
321			GF	33	ED	Medical Assistance Grants E & D	(660)	(686)	(1,346)	(779)	(878)	(1,657)
322			GF	33	FC	Medical Assistance Grants F & C	(1,015)	(2,193)	(3,208)	(2,410)	(2,643)	(5,053)
323			GF	33	AD	Medical Assistance Grants Adults	(453)	(244)	(697)	(298)	(402)	(700)
324			HCAF	31		MinnesotaCare Grants	(603)	(2,207)	(2,810)	(2,400)	(2,504)	(4,904)
325												
326	76					Payment of Medicare Crossover Claims	(10,824)	(32,296)	(43,120)	(34,758)	(37,504)	(72,262)
327						Limits MA payments for Medicare Part B cost-sharing for dually eligible clients to an amount such that the overall provider reimbursement does not exceed the MA payment rate for a particular service. This option is effective January 1, 2012.						
328						GF TOTAL	(10,824)	(32,296)	(43,120)	(34,758)	(37,504)	(72,262)
329		1	GF	33	ED	Medical Assistance Grants	(10,829)	(32,296)	(43,125)	(34,758)	(37,504)	(72,262)
330		1	GF	11		Finance & Management (MMIS)	(10,023)	(32,230)	(43,123)	(34,730)	(37,304)	0
331				. 1			5			0		0

Trkg.	page	Bill						G	overnor Reco	ommendation		
Line	#	Ref.	Fund	BACT	SUB	DESCRIPTION	FY 2012	FY 2013	FY 12-13	FY 2014	FY 2015	FY 14-15
332	77					Suspend Managed Care Incentive Payments	(783)	(783)	(1,566)	0	0	0
333						Suspends for two years state funding for incentive payments for managed care plans that expand services to Minnesota Health Care Program enrollees. The incentive payments are intended to reimburse MCOs for the expanded service until the cost of the services can be reflected in managed care capitation payments.						
334						HCAF TOTAL	(138)	(138)	(276)	0	0	0
335						GF TOTAL	(645)	(645)	(1,290)	0	0	0
336			GF	33	FC	Medical Assistance Grants	(645)	(645)	(1,290)	0	0	0
337			HCAF			MinnesotaCare Grants	(138)	(138)	(276)	0	0	0
338							(	(/				
339	78					Reduce Basic Care Rates	(1,053)	(1,558)	(2,611)	(1,617)	(1,576)	(3,193)
340						Applies a 0.5% reduction to FFS rates for basic care services effective July 1, 2011, and to managed care effective January 1, 2012.						
341						HCAF TOTAL	(42)	(112)	(154)	(150)	(166)	(316)
342						GF TOTAL	(1,011)	(1,446)	(2,457)	(1,467)	(1,410)	(2,877)
343			GF	33	ED	MA Grants E & D	(290)	(525)	(815)	(589)	(658)	(1,247)
344			GF	33	FC	MA Grants F & C	(424)	(559)	(983)	(629)	(740)	(1,369)
345			GF	33	AD	MA Grants Adults	(297)	(362)	(659)	(249)	(12)	(261)
346			HCAF	31		MinnesotaCare Grants	(42)	(112)	(154)	(150)	(166)	(316)
347			_								( /	
348	79					Reduce Rates for Transportation Services	(1,649)	(2,458)	(4,107)	(2,652)	(2,881)	(5,533)
349						Reduces fee-for-service rates for transportation services (including ambulance, specialized transportation services (STS) and access transportation services by 4.5% effective July 1, 2011. Managed care rates must be adjusted to reflect the fee-for- service reduction effective January 1, 2012.						
350						GF TOTAL	(1,649)	(2,458)	(4,107)	(2,652)	(2,881)	(5,533)
351			GF		ED	MA Grants E & D	(325)	(377)	(702)	(424)	(473)	(897)
352			GF		FC	MA Grants F & C	(1,169)	(1,988)	(3,157)	(2,164)	(2,405)	(4,569)
353			GF		AD	MA Grants Adults	(157)	(93)	(250)	(64)	(3)	(67)
354			GF	11		Finance & Management (MMIS)	2	0	2			
355												
356	80					Maintain Child & Teen Check-up Rates	(130)	(265)	(395)	(406)	(552)	(958)
357						Maintain rates on payments to providers for Child & Teen Check- Ups (C&TC) at the payment level established on October 1, 2010. Under existing rule the rates are updated on October 1 of each year.						
358						GF TOTAL	(130)	(265)	(395)	(406)	(552)	(958)
359			GF	33	FC	MA Grants	(130)	(265)	(395)	(406)	(552)	(958)
360												

Trkg.	page	Bill					Governor Recommendation					
Line	#	Ref.	Fund	BACT	SUB	DESCRIPTION	FY 2012	FY 2013	FY 12-13	FY 2014	FY 2015	FY 14-15
361	81					Delay Inpatient Hospital Rebasing	0	(99,041)	(99,041)	(27,202)	(3,625)	(30,827)
362						Delays the rebasing of FFS inpatient hospital rates for the six- month period beginning January 1, 2013.						
363						GF TOTAL	0	(99,041)	(99,041)	(27,202)	(3,625)	(30,827)
364			GF	33	ED	MA Grants E & D	0	(29,169)	(29,169)	(10,410)	(16)	(10,426)
365			GF	33	FC	MA Grants F & C	0	(45,085)	(45,085)	(11,481)	(3,575)	(15,056)
366			GF	33	AD	MA Grants Adults	0	(24,787)	(24,787)	(5,311)	(34)	(5,345)
367												
368	82					Reduce PMAP MERC Funding	(12,808)	(12,808)	(25,616)	(12,808)	(12,808)	(25,616)
369						Reduces the transfer, to the Medical Education and Research Cost (MERC) fund, of MA funds that have been carved out of managed care payments. This is effective July 1, 2010.						
370						GF TOTAL	(12,808)	(12,808)	(25,616)	(12,808)	(12,808)	(25,616)
371			GF	33	FC	Medical Assistance Grants	(12,808)	(12,808)	(25,616)	(12,808)	(12,808)	(25,616)
372											,	
373	83					MA Hospital Surcharge and Payment Rates	(180,176)	(194,558)	(374,734)	(235,723)	(289,783)	(525,506)
374						Effective July 1, 2011, increases the MA surcharge on hospitals from 1.56 percent to 4.45 percent The surcharge is applied to all hospital revenue with the exception of Medicare. Also increases MA FFS reimbursement for inpatient hospital by 24% from July 1, 2011, to September 30, 2012, and by 18.5% from October 1, 2012 to September 30, 2013.						
375						GF TOTAL	(180,176)	(194,558)	(374,734)	(235,723)	(289,783)	(525,506)
376			GF	REV2		MA Hospital Surcharge	(242,118)	(256,053)	(498,171)	(272,524)	(290,510)	(563,034)
377			GF	33	ED	MA Grants	33,574	30,951	64,525	15,762	0	15,762
378			GF	33	FC	MA Grants	18,654	16,858	35,512	7,444	0	7,444
379			GF	33	AD	MA Grants	9,714	13,686	23,400	13,595	727	14,322

Trkg.	page	Bill					Governor Recommendation					
Line	#	Ref.	Fund	BACT	SUB	DESCRIPTION	FY 2012	FY 2013	FY 12-13	FY 2014	FY 2015	FY 14-15
380												
381	84					Managed Care Surcharge and Payment Rates	(92,266)	(101,059)	(193,325)	(98,302)	(118,206)	(216,508)
						Increase MA Surcharge and payment rates for managed care plans, including county based purchasers, to 4.3%						
382 383						HCAF TOTAL	4,799	9,273	14,072	12,234	13,731	25,965
384						GF TOTAL	(97,065)	(110,332)	(207,397)	(110,536)	(131,937)	(242,473)
			05				( , ,					( ) )
385			GF	REV2		MA HMO Surcharge	(132,335)	(177,952)	(310,287)	(181,716)	(202,179)	(383,895)
386			GF	33	ED	MA Grants E & D	10,197	16,517	26,714	18,873	20,630	39,503
387			GF	33	FC	MA Grants F & C	21,100	35,240	56,340	40,542	47,245	87,787
388			GF	33	AD	MA Grants Adults	3,973	15,863	19,836	11,765	2,367	14,132
389			HCAF	31		MinnesotaCare Grants	4,799	9,273	14,072	12,234	13,731	25,965
390												
391	85					End MnCare for Adults above 200% FPG	(9,484)	(21,908)	(31,393)	(28,290)	(29,908)	(58,198)
001	00						(0,404)	(21,000)	(01,000)	(20,200)	(20,000)	(00,100)
392												
393						GF TOTAL	603	1.408	2,011	0	0	0
394						HCAF TOTAL	(10,087)	(23,316)	(33,404)	(28,290)	(29,908)	(58,198)
395			GF	33	FC	Medical Assistance Grants F & C	0	0	0	0	0	0
396			GF	REV2	10	Reduction in DSH Revenue	603	1,408	2,011	0	0	0
397			HCAF	31		MinnesotaCare Grants	(10,092)	(23,194)	(33,287)	(28,206)	(29,824)	(58,030)
398			HCAF	11		Finance & Management; MMIS	49	(23,134)	49	(20,200)	(23,024)	(30,030)
399			HCAF	13		MinnesotaCare Operations	(67)	(187)	(254)	(130)	(130)	(260)
400			HCAF	REV2		Admin FFP @ 35%	23	65	88	46	46	92
400			TICAI	IL VZ			23	05	00	40	40	52
401												
402	86					Repeal Unapproved MA Bridge Program	(3,974)	(16,677)	(20,651)	(27,037)	(33,963)	(61,000)
405						Repeals the 2007 and 2008 laws that permit children who lose MA eligibility due to an increase in income to remain on MA for an additional 2 months and provide automatic MinnesotaCare eligibility until their next renewal. Federal approval of waiver amendment to implement these laws is still pending.						
403 404		+				HCAF Total	(3,974)	(16,677)	(20,651)	(27,037)	(33,963)	(61,000)
404			HCAF	31		MinnesotaCare Grants	(719)	(10,077)	(10,432)	(19,279)	(25,441)	(44,720)
		+			50	MA Grants paid by HCAF	· · ·			· · · ·		
406		-	HCAF	33	FC		(2,925)	(6,566)	(9,491)	(7,510)	(8,192)	(15,702)
407			HCAF	13		MinnesotaCare Operations	(508)	(612)	(1,120)	(382)	(508)	(890)
408			HCAF	REV2		Admin FFP @ 35%	178	214	392	134	178	312
409												

Trkg.	page	Bill					Governor Recommendation						
Line	#	Ref.	Fund	BACT	SUB	DESCRIPTION	FY 2012	FY 2013	FY 12-13	FY 2014	FY 2015	FY 14-15	
410	87					Repeal Unapproved Rolling & Grace Month	(1,778)	(8,511)	(10,289)	(9,841)	(9,178)	(19,019)	
411						Repeals the MinnesotaCare grace month (which provides persons with additional time to pay late premiums without a lapse in coverage) and rolling month ( which gives a person an extra month to submit renewal forms before being disenrolled). These laws were enacted in 2008. Federal approval of waiver amendment to implement these laws is still pending.						0	
412						HCAF FUND	(1,778)	(8,511)	(10,289)	(9,841)	(9,178)	(19,019)	
412			HCAF	31		MinnesotaCare Grants			(10,289)	(9,841)	(9,178)		
413			HCAF	13		MinnesotaCare Operations	(1,778)	(8,511) 0	(10,289)			(19,019)	
						Admin FFP @ 35%	0	0	0	0	0	0	
415 416			HCAF	REV2			0	0	0	0	0	0	
417	89					Repeal Unapproved MNCare Changes	(193)	(2,154)	(2,347)	(8,154)	(10,466)	(18,620)	
418						Repeals 2009 laws that exempt children from the MinnesotaCare income limit of 275% of the Federal Poverty Guidelines (FPG), and permit children in households with incomes below 275% FPG to remain enrolled in MinnesotaCare even if they fail to submit renewal documents.						0	
419						HCAF TOTAL	(193)	(2,154)	(2,347)	(8,154)	(10,466)	(18,620)	
420			HCAF	31		MinnesotaCare Grants	(133)	(2,010)	(2,159)	(7,947)	(10,259)	(18,206)	
421			HCAF	13		MinnesotaCare Operations	(143)	(222)	(2,133)	(319)	(10,239)	(638)	
422			HCAF	REV2		Admin FFP @ 35%	23	78	101	112	112	224	
423													
424	91					Federal Compliance: Eligibility Changes	17,918	41,236	59,154	36,773	7,726	44,499	
425						Maintains current eligibility (delays implementation of eligibility changes for MA and MinnesotaCare) to comply with the maintenance of effort requirement for eligibility under the Patient Protection and Affordable Care Act (PPACA). The federal law prohibits MA eligibility for adults from being reduced until January 1, 2014 and until October 1, 2019 for children.							
426						HCAF TOTAL	1,988	2,904	4,892	2,904	2,904	5,808	
427						GF TOTAL	15,930	38,332	54,262	33,869	4,822	38,691	
428			GF	33	ED	MA E & D	9,971	22,948	32,919	17,979	0	17,979	
429			GF	33	FC	MAF&C	631	933	1,564	933	933	1,866	
430			GF	33	LF	MALTC	5,973	11,779	17,752	12,749	3,889	16,638	
431		1	GF	33	LW	MA LTC Waivers & Home Care	3,542	7,602	11,144	6,278	0	6,278	
						Aging & Adult Services Grants							
432			GF	53		(reduce Essential Community Supports Grants)	(6,410)	(7,279)	(13,689)	(5,919)	0	(5,919)	
433			GF	34		Alternative Care Grants	2,223	2,349	4,572	1,849	0	1,849	
434			HCAF	31		MinnesotaCare Grants	100	100	200	100	100	200	
435			HCAF	31		MinnesotaCare Grants	1,888	2,804	4,692	2,804	2,804	5,608	
436													

Trkg.	page	Bill	Governor Recomme						mmendation			
Line	#	Ref.	Fund	BACT	SUB	DESCRIPTION	FY 2012	FY 2013	FY 12-13	FY 2014	FY 2015	FY 14-15
437	93					Fund Level Change: Adjust Transfers between the HCAF & GF	0	0	0	0	0	0
438						Current Law Transfers to Balance HCAF & GF						
439						GF TOTAL	0	115,268	115,268	(48,000)	0	(48,000)
440						HCAF FUND	0	(115,268)	(115,268)	48,000	0	48,000
441			HCAF	REV2		HCAF Transfers In	0	(163,268)	(163,268)	0	0	0
442			HCAF	REV2		HCAF Transfers Out	0	48,000	48,000	48,000	0	48,000
443			GF	REV2		GF Transfers In	0	(48,000)	(48,000)	(48,000)	0	(48,000)
444			GF	REV2		GF Transfers Out	0	163,268	163,268	0	0	0
445								,	,			
446	94					Tighten CD Tx Placement Criteria	(3,661)	(5,425)	(9,086)	(5,502)	(5,843)	(11,345)
						Tightens placement criteria for admission into residential chemical dependency treatment programs in order to ensure appropriate use of this more intensive level of service. Clients affected by this change will be referred to outpatient treatment instead of residential treatment.						
447 448						GF TOTAL	(3,653)	(5,414)	(9,067)	(5,493)	(5,838)	(11,331)
449						HCAF TOTAL	(8)	(11)	(19)	(9)	(5,050)	(14)
449			GF	35		CD Entitlement Grants	(3,653)	(5,414)	(9,067)	(5,493)	(5,838)	(11,331)
451			HCAF	31		HCAF	(8)	(11)	(19)	(9)	(0,000)	(11,001)
452				0.			(0)	(1.1)	(10)	(0)	(0)	( ) )
453	95					County Share of CD Treatment Costs	(4,494)	(4,991)	(9,485)	(5,194)	(5,606)	(10,800)
454						Increases county share of chemical dependency treatment costs. Chemical dependency treatment placement decisions funded through the Consolidated Chemical Dependency Treatment Fund (CCDTF) are made at the local level, using objective criteria in processes governed by state statutes and administrative rule. Increasing the county share of costs for this care provides increased local incentives for judicious use of public treatment resources and reduces the state share of the cost of chemical dependency treatment.						
455		1				GF TOTAL	(4,494)	(4,991)	(9,485)	(5,194)	(5,606)	(10,800)
456			GF	35		CD Entitlement Grants	(4,494)	(4,991)	(9,485)	(5,194)	(5,606)	(10,800)
457							/	, , - , ,	, , , , , ,		, <i>, 1</i>	, ,,

Trkg.	page	Bill						G	overnor Reco	ommendation		
Line	#	Ref.	Fund	BACT	SUB	DESCRIPTION	FY 2012	FY 2013	FY 12-13	FY 2014	FY 2015	FY 14-15
458	96					Reduce SOS Mental Health Services	(2,670)	(2,713)	(5,383)	(2,713)	(2,713)	(5,426)
459						Closes the Willmar adult MH subacute program and moves the child & adolescent program into that space.						
460						GF TOTAL	(2,670)	(2,713)	(5,383)	(2,713)	(2,713)	(5,426)
461			GF	61		SOS mental health services	(2,670)	(2,713)	(5,383)	(2,713)	(2,713)	(5,426)
462			GF	REV2		SOS revenue impact	0	0	0	0	0	0
463												
464	97					Coverage for Tribal Child Placements	0	0	0	0	0	0
465						Makes clear the authority to implement Medical Assistance reimbursement of children's residential mental health treatment services through the federal encounter rate for placements of Indian children in Tribally operated or contracted children's residential mental health treatment programs. A one-time systems cost of \$27,000 is funded through a dedicated account in the special revenue fund.						
466					Fund	DED TOTAL	0	0	0	0	0	0
467			DED	Exp	Spec. Rev	Health Care Administration	27	0				
468			DED	Rev	Spec. Rev	Rev Max Fund	(27)	0	0	0	0	0
469												
470	98					MSOP Budget Pressure	2,561	5,258	7,819	5,258	5,258	10,516
471						This item provides an increase in base funding for the costs related to the growth of the MSOP population. The funding increase reflects current growth estimates for this biennium.						
472						GF TOTAL	2,561	5,258	7,819	5,258	5,258	10,516
473			GF	71		MSOP Budget Net Pressure	2,846	5,842	8,688	5,842	5,842	11,684
474			GF	REV2		MSOP Cost of Care offset @ 10%	(285)	(584)	(869)	(584)	(584)	(1,168)
475							. ,		. ,			