



**Governor's Budget Highlights
Fiscal Year 2012-13**

California Department of Public Health

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January 10, 2012

CALIFORNIA DEPARTMENT OF PUBLIC HEALTH PROGRAM OVERVIEW

The mission of the California Department of Public Health (CDPH) is to optimize the health and well-being of the people in California, primarily through population-based programs, strategies, and initiatives.

The CDPH's goals are to achieve health equities and eliminate health disparities; eliminate preventable disease, disability, injury, and premature death; promote social and physical environments that support good health for all; prepare for, respond to, and recover from emerging public health threats and emergencies; improve the quality of the workforce and workplace; and promote and maintain an efficient and effective organization. The CDPH is working toward these goals through its programmatic and operational support activities and in collaboration with local health departments and other organizations throughout the State.

CDPH comprises five Public Health Centers as well as Health Information and Strategic Planning, Emergency Preparedness Office, Administration, and Office of Public Affairs.

GENERAL BUDGET OVERVIEW

The CDPH budget supports activities and services that reinforce the State's commitment to the health and well-being of all Californians. For Fiscal Year (FY) 2012-13, the Governor's Budget provides \$3.4 billion for the support of CDPH programs and services, a decrease of 2.78% from the 2011-12 Budget Act enacted on June 30, 2011. Of the amount approved, \$668.8 million is for State Operations and \$2.759 billion is for Local Assistance. The budget affirms CDPH's commitment to address the public health needs of Californians.

Total CDPH Budget

Dollars in thousands

Governor's Budget Fund Source	2011-12 Enacted Budget	2011-12 Revised Budget	2012-13 Proposed (Governor's Budget)	% Change from 2011-12 Enacted Budget
General Fund	226,161	132,380	124,805	-44.82%
Federal Funds	1,956,482	1,989,065	1,998,122	2.13%
Special Funds & Reimbursements	1,343,117	1,383,045	1,304,742	-2.86%
Total Funds	3,525,760	3,504,490	3,427,669	-2.78%

The charts below and the narrative that follows describe the specific budget adjustments.

State Operations

State Operations by Program					
Governor's Budget Program Title	Program	2011-12 Enacted Budget	2011-12 Revised Budget	2012-13 Proposed (Governor's Budget)	% Change from 2011-12 Enacted Budget
Public Health Emergency Preparedness	10	46,585	46,078	40,687	-12.66%
Public and Environmental Health	20	427,037	419,172	427,579	0.13%
Licensing & Certification	30	186,913	191,957	200,487	7.26%
Administration	40.01	27,655	27,318	31,972	15.61%
Distributed Administration	40.02	-27,655	-27,318	-31,972	15.61%
Total State Operations		660,535	657,207	668,753	1.24%

State Operations by Fund Source				
Governor's Budget Fund Source	2011-12 Enacted Budget	2011-12 Revised Budget	2012-13 Proposed (Governor's Budget)	% Change from 2011-12 Enacted Budget
General Fund	87,635	84,759	83,627	-4.57%
Federal Funds	258,207	255,540	253,666	-1.76%
Special Funds & Reimbursements	314,693	316,908	331,460	5.33%
Total State Operations	660,535	657,207	668,753	1.24%

Local Assistance

Local Assistance by Program					
Governor's Budget Program Title	Program	2011-12 Enacted Budget	2011-12 Revised Budget	2012-13 Proposed (Governor's Budget)	% Change from 2011-12 Enacted Budget
Public Health Emergency Preparedness	10	63,755	63,755	61,284	-3.88%
Public and Environmental Health	20	2,801,470	2,783,528	2,697,632	-3.71%
Total Local Assistance		2,865,225	2,847,283	2,758,916	-3.71%

Local Assistance by Fund Source				
Governor's Budget Fund Source	2011-12 Enacted Budget	2011-12 Revised Budget	2012-13 Proposed (Governor's Budget)	% Change from 2011-12 Enacted Budget
General Fund	138,526	47,621	41,178	-70.27%
Federal Fund	1,698,275	1,733,525	1,744,456	2.72%
Special Funds & Reimbursements	1,028,424	1,066,137	973,282	-5.36%
Total Local Assistance	2,865,225	2,847,283	2,758,916	-3.71%

PROGRAMMATIC ADJUSTMENTS

The specific adjustments listed below reflect the major budgetary changes since the introduction of the 2011 Budget Act. The major changes include Budget Change Proposals, November Estimates, and Section Letters.

References to “GF” are to the General Fund, “OF” refers to Other Funds including Special Funds, Federal Funds, and Reimbursements; and “TF” represents Total Funds.

I. Public Health Emergency Preparedness Program

The Public Health Emergency Preparedness Program coordinates preparedness and response activities across CDPH for all public health emergencies, including natural disasters, acts of terrorism, and pandemic diseases. The program plans and supports surge capacity in medical care and public health systems to meet needs during emergencies. The program administers federal and state funds that support CDPH's emergency preparedness activities. Major budget adjustments include:

2011-12 Budget Adjustments

No budget adjustment.

2012-13 Budget Adjustments

No budget adjustment.

II. Center for Chronic Disease Prevention and Health Promotion

The Center for Chronic Disease Prevention and Health Promotion comprises the Division of Chronic Disease and Injury Control and the Division of Environmental and Occupational Disease Control. The Center addresses the prevention and control of chronic disease and injury through a focus on the social and environmental determinants of health and health inequities. The Center's programs encompass chronic disease and injury surveillance, tobacco control, nutrition and physical activity, diabetes, cancer, cardiovascular diseases, asthma, obesity prevention, injuries and violence prevention, and, occupational and environmental disease control. The Center currently staffs the Strategic Growth Council's Health in All Policies Task Force and the Climate Action Team Public Health Workgroup. Major budget adjustments include:

2011-12 Budget Adjustments

Network for a Healthy California

\$33,103,000 TF
\$33,103,000 OF

The Governor's Budget reflects an increase in Local Assistance reimbursements expenditure authority in the amount of \$33.1 million to implement the CalFresh Outreach Program as part of the effort to promote healthy eating and fruit and vegetable

consumption. The increase will provide funding to community-based organizations and non-profit organizations to conduct community CalFresh outreach activities, which will increase awareness of food stamp benefits and increase participation in the CalFresh program in California.

California Healthy Homes and Lead Poisoning Prevention

	\$495,000 TF
State Operations	\$328,000 OF
Local Assistance	\$167,000 OF

The Governor’s Budget reflects an increase in federal expenditure authority for State Operations in the amount of \$328,000 and for Local Assistance in the amount of \$167,000. These funds are to address a broad range of inter-related housing issues, with lead poisoning being included as one of these issues. These funds will be used to continue existing efforts on conducting outreach and education, case finding and case management (including home visits), and data analyses to identify high-risk populations for housing-related health issues like elimination of housing hazards which cause lead poisoning (such as lead-contaminated paint, dust, and soil); hazards related to asthma (such as mold, allergens, and pesticides); hazards that result in burns and injuries (such as lack of smoke detectors or pools without fencing); and hazards that result in other toxic exposures.

Affordable Care Act Coordinated Chronic Disease Program

	\$1,596,000 TF
	\$1,596,000 OF

The Governor’s Budget reflects an increase in federal expenditure authority for State Operations in the amount of \$1.6 million from the Affordable Care Act funds for the purposes of creating a Coordinated Chronic Disease Program (CCDP) that will collaborate with the current Chronic Disease Prevention and Health Promotion (CCDPHP) Programs within CDPH. The program will provide leadership and coordination, and support development, implementation and evaluation in order to increase efficiency and impact of categorical disease and risk factor prevention programs. The CCDP will create a State Chronic Disease Prevention and Health Promotion Plan that will address preventive services and chronic disease management, and present strategies that improve policies, environments, programs, and infrastructure to address the five leading chronic disease causes of death and disability (heart disease, cancer, stroke, diabetes, and arthritis) and their associated risk factors, including tobacco use, nutrition, physical activity, and obesity, at the state and community levels.

Every Woman Counts (EWC) November Estimate

- \$14,066,000 TF
- \$14,066,000 GF

The EWC November Estimate reflects a savings in current year General Fund Local Assistance funding of \$14.1 million. The savings is primarily the result of a decrease in caseload projection for the EWC program. There is a projected shift of caseload from the EWC program to the county based Low Income Health Program (LIHP) for which all California counties have proposed implementation dates during FY 2011-12. The approximate number of EWC women expected to shift in FY 2011-12 to the LIHP is 20,700.

2012-13 Budget Adjustments

Affordable Care Act Coordinated Chronic Disease Prevention and Health Promotion Program

\$1,900,000 TF
\$1,900,000 OF

The Governor's Budget reflects an increase of \$1.9 million in federal expenditure authority for an initiative aimed at establishing a Coordinated Disease Prevention Program. The Initiative is to provide leadership and coordination, and support development, implementation, and evaluation of the Centers for Disease Control and Prevention (CDC)-funded Chronic Disease Prevention and Health Promotion Programs and the new State Chronic Disease Prevention and Health promotion Plan.

Conversion of Contract Staff to State Staff in Childhood Lead Poisoning Prevention Program

22.0 Positions
-\$381,000 TF
-\$381,000 OF

The Governor's Budget reflects a contract conversion of 22.0 contract staff using redirected positions from Work Force Cap (WFC) Plan to state staff in the Childhood Lead Poisoning Prevention (CLPP) program which also saves \$381,000 in State Operations. This conversion will allow for CDPH to be in compliance with Government Code 19130, which prohibits contracting for services which can be performed by civil service employees. Moreover, this conversion will allow CLPP to meet program mandates and improve the quality of services provided.

Early Case Capture of Pediatric Cancers

\$342,000 TF
\$342,000 OF

The Governor's Budget reflects an increase of \$342,000 in State Operations federal expenditure authority to enhance the California Cancer Registry (CCR) infrastructure to facilitate more rapid reporting of cancer cases, and increase the availability of this data for surveillance activities all across the country. This funding for the Cancer

Surveillance and Research Branch within CDPH originates from the federal Centers for Disease Control and Prevention (CDC).

Reduction of Domestic Violence Training and Education Fund

- \$280,000 TF
- \$280,000 OF

The Governor's Budget reflects a permanent decrease of \$280,000 in State Operations expenditure authority from the Domestic Violence Training and Education Fund (DVTEF) 0642. The decrease is primarily due to a continuing decline in the revenues of the DVTEF and to make sure that the fund maintains a sufficient fund balance.

Every Woman Counts (EWC) November Estimate

- \$14,015,000 TF
- \$7,802,000 GF
- \$6,213,000 OF

The EWC November Estimate reflects a Local Assistance decrease of \$14.0 million which includes a General Fund decrease of \$7.8 million and a Breast Cancer Control Account (BCCA) decrease of \$6.2 million. The Estimate changes are primarily due to the decrease in caseload projection. In FY 2012-13, approximately 52,700 EWC women are projected to shift to the county based Low Income Health Program (LIHP).

III. Center for Infectious Diseases

The Center for Infectious Diseases comprises the Division of Communicable Disease Control, the Office of AIDS, and the California Office of Binational Border Health. The Center oversees the investigation, prevention, and control of infectious diseases and the assessment, prevention, and interruption of the transmission of HIV and the provision of services to HIV-infected Californians. Major budget adjustments include:

2011-12 Budget Adjustments

AIDS Drug Assistance Program (ADAP) November Estimate

- \$29,318,000 TF
- \$76,840,000 GF
\$47,522,000 OF

The November Estimate reflects a current year net decrease in ADAP funding of \$29.3 million (a \$76.8 million General Fund decrease, offset by a \$29.4 million ADAP Rebate Fund and \$18.2 million Federal Trust Fund increase) compared to the 2011 Budget Act. ADAP savings is due to updated projections and the movement of ADAP clients into the Low Income Health Program (LIHP).

2012-13 Budget Adjustments

AIDS Drug Assistance Program (ADAP) November Estimate

- \$107,310,000 TF
- \$76,180,000 GF
- \$31,130,000 OF

The November Estimate reflects a budget year net decrease in ADAP funding of \$107.3 million. This is the result of a General Fund decrease of \$76.2 million, ADAP Rebate Fund decrease of \$8.3 million, Reimbursement decrease of \$24.8 million, and \$2.0 million increase in Federal Trust Fund. The total decrease is primarily due to savings achieved through the movement of ADAP clients into LIHP offset by an increase in the projected caseload.

IV. Center for Family Health

The Center for Family Health is comprised of the Genetic Disease Screening Program (GDSP); Maternal, Child and Adolescent Health (MCAH) Program; Office of Family Planning (OFP) and the Women, Infants and Children (WIC) Supplemental Nutrition Program. Major budget adjustments include:

2011-12 Budget Adjustments

MCAH Federal Funds - Maternal Infant and Early Childhood Home Visiting Program

	\$3,857,000 TF
State Operations	-\$843,000 OF
Local Assistance	\$4,700,000 OF

The Governor's Budget reflects a decrease of \$843,000 federal expenditure authority in State Operations and an increase of \$4.7 million federal expenditure authority in Local Assistance. Reducing the federal expenditure authority by \$843,000 in current year (CY) will bring the budget in alignment with the federal Title V Block Grant funding appropriated to MCAH in order to avoid expenditures that exceed revenues. In September 2011, MCAH Division received notification of a federal grant award for a competitive expansion grant from the Patient Protection and Affordable Care Act (ACA). ACA amended the Social Security Act, Title V, Section 511(b) and established the Maternal Infant and Early Childhood Home Visiting Program (MIECHV). The MIECHV grant will allow CDPH to provide Local Assistance funding of \$4.7 million in CY to at-risk populations in eight additional LHJs/communities through the California Home Visiting Program. The MIECHV competitive expansion grant is a four-year award (\$9.3 million each year). Implementation of service delivery must begin immediately in order to successfully meet the MIECHV expansion grant program objectives.

Genetic Disease Screening Program (GDSP) November Estimate

-\$5,233,000 TF
-\$5,233,000 OF

The November Estimate reflects a decrease of \$5.2 million or 5.6 percent in Local Assistance expenditure authority in the Genetic Disease Testing Fund compared to the 2011 Budget Act. The Estimate projects the Newborn Screening caseload to decrease by 5.1 percent and corresponding expenditures are expected to decrease by \$2.6 million or 5.8 percent below the Budget Act. The Estimate also projects the Prenatal Screening caseload to decrease by 10.7 percent from previous projections and expenditures are estimated to decrease by \$2.6 million or 5.3 percent below the Budget Act.

Women, Infants and Children (WIC) November Estimate

\$12,200,000 TF
\$12,200,000 OF

The Governor's Budget reflects an increase of \$12.2 million in current year Local Assistance federal expenditure authority for WIC compared to the 2011 Budget Act. The increased expenditures are due to a request to provide appropriation authority at the level equal to the projected federal revenues for the WIC program necessary to fund projected expenditures.

2012-13 Budget Adjustments

MCAH Federal Funds – Maternal Infant and Early Childhood Home Visiting Program

	\$20,430,000 TF
State Operations	\$650,000 OF
Local Assistance	\$19,780,000 OF

The Governor's Budget reflects an increase in \$650,000 in federal expenditure authority for State Operations and \$19.8 million in federal expenditure authority in Local Assistance to continue and expand statewide operations of the California Home Visiting Program (CHVP). The CHVP is administered by the MCAH Division of CDPH and carried out under the Social Security Act, Title V, Section 511(b) which established the Maternal Infant and Early Childhood Home Visiting Program (MIECHV), to improve coordination of services, and identify and implement evidenced-based Home-Visiting programs to improve outcomes for low income families who reside in at-risk communities.

Assembly Bill (AB) 395: Expand California's Newborn Screening Program

10.0 Positions \$5,297,000 TF
\$5,297,000 OF

The Governor's Budget reflects an increase of 10.0 positions and associated \$5.3 million in State Operations expenditure authority for the Genetic Disease Screening Program (GDSP) to comply with AB 395. The legislation expands the statewide Newborn Screening Program to include testing for Severe Combined Immunodeficiency (SCID) and other T-cell lymphopenias detectable as a result of SCID. The funding is part of the Genetic Disease Testing Fund.

MCAH Federal Funds

-6.0 Positions -\$6,846,000 TF
State Operations -\$2,246,000 OF
Local Assistance -\$4,600,000 OF

The Governor's Budget reflects a decrease of 6.0 positions and a decrease of expenditure authority in the amount of \$2.2 million for State Operations and \$4.6 million in Local Assistance for the MCAH Division. These decreases are a result of the reduction to the federal Title V Block Grant funding, and the erosion of the second year set-aside from the Title V Block Grant. These budgetary reductions are proposed to more closely align expenditures with the actual grant award.

Genetic Disease Screening Program (GDSP) November Estimate

-\$6,250,000 TF
-\$6,250,000 OF

The GDSP November Estimate reflects a slight reduction of approximately \$1 million in budget year expenditure authority in Local Assistance for the Genetic Disease Testing Fund as compared to the prior 2011-12 fiscal year. The November Estimate includes adjustments in caseload and expenditures for the program budget in accordance with a reduced newborn caseload. Birth rates are projected to remain flat with a marginal 0.5% growth in FY 2012-13.

Women, Infants and Children (WIC) November Estimate

\$41,493,000 TF
\$41,493,000 OF

The November Estimate reflects an increase for budget year Local Assistance federal authority of \$41.5 million for the WIC Program compared to the 2011 Budget Act. The increased expenditures are due to an increase in caseload and a request to provide appropriation authority at the level equal to the projected federal revenues for the WIC program necessary to fund projected expenditures.

V. Health Information and Strategic Planning

Health Information and Strategic Planning disburses and monitors funds to counties for specified health services; and coordinates and oversees the collection, management, and dissemination of public health and vital records data. Major budget adjustments include:

2011-12 Budget Adjustments

No budget adjustment.

2012-13 Budget Adjustments

No budget adjustment.

VI. Center for Environmental Health

The Center for Environmental Health comprises the Division of Food, Drug and Radiation Safety and the Division of Drinking Water and Environmental Management. The Center administers programs that protect the public from unsafe drinking water; regulate the generation, handling, and disposal of medical waste; oversees the disposal of low-level radioactive waste; and protects and manages food, drug, medical device, and radiation sources. Major budget adjustments include:

2011-12 Budget Adjustments

AB 411/AB 1876 Beach Water Quality Monitoring

\$984,000 TF
\$984,000 OF

The Governor’s Budget reflects an increase in Local Assistance reimbursement authority for the Environmental Management Program in the amount of \$984,000. CDPH will contract with the State Water Resources Control Board (SWRCB) to continue the Beach Safety program funded by Proposition 13 Clean Beaches Grant Program amendment. The funding will assist in administering agreements with local environmental agencies for performance of beach water quality monitoring and public notification programs as required by the Assembly Bill (AB) 441/AB 1876.

2012-13 Budget Adjustments

Safe Drinking Water State Revolving Fund

23.0 Positions

\$2,810,000 TF
\$2,810,000 OF

The Governor’s Budget reflects an increase for State Operations expenditure authority in the amount of \$2.8 million from the Safe Drinking Water Revolving Fund (SDWSRF) to convert 23.0 limited-term positions expiring on June 30, 2012, to permanent

positions. The SDWSRF was established in 1996 as a program to provide low interest loans and grants to drinking water systems for infrastructure improvements to assure compliance with safe drinking water standards. The SDWSRF is funded through an annual allocation from the US Environmental Protection Agency (EPA) to the state with a match from state funds. Making these limited-term positions permanent will ensure sufficient staff is available to provide technical assistance and funding support to public water systems that apply for SDWSRF loans and grants.

Renewal of Proposition 50 Limited-Term Positions and Re-appropriation of Prior Years Authority

12.0 LT Positions	\$95,611,000 TF
	\$95,611,000 OF

The Governor’s Budget reflects the renewal of 12.0 limited-term positions due to expire on June 30, 2012. In addition, the Governor’s Budget reflects re-appropriation of prior years from Special Fund 6031 (Proposition 50). The re-appropriation is needed to align appropriation authority with actual expenditures. The renewed positions are supported by Proposition 50 and were first approved for FY 2003-04. The renewal of the limited-term positions will ensure that Proposition 50 program delivery will continue to carry out activities which reduce the public’s risks of contracting waterborne illnesses by preventing contamination through enhanced management, operation, and infrastructure improvements of California’s public water systems. Out of the \$95.6 million amount, \$1.5 million is for State Operations and \$94.1 million for Local Assistance.

Radiation Safety Program

5.0 Positions	\$672,000 TF
	\$672,000 OF

The Governor’s Budget reflects the approval to convert 5.0 limited-term positions to permanent positions and the associated State Operations authority for \$672,000 from the Radiologic Control Fund 0075. These Health Physicists positions will help the Radiologic Health Branch meet state and federal mandates by reducing workload backlogs and maintaining a viable enforcement program.

Small Water Systems Program

2.0 Positions	\$184,000 TF
	\$184,000 OF

The Governor’s Budget reflects an increase in State Operations expenditure authority of \$184,000 from the Safe Drinking Water Account and 2.0 positions to carry out small water systems program in the Drinking Water Division. Previously, counties were delegated primacy by CDPH to carry out the regulatory small water system programs. Due to budget shortfall and other constraints, each county has elected to relinquish primacy and to return its small water system program to CDPH.

Environmental Laboratory Accreditation Program

- \$450,000 TF
- \$450,000 OF

The Governor's Budget reflects a decrease in State Operations expenditure authority in the Environmental Laboratory Improvement Fund (ELIF) 0179 to realign revenues, which have decreased in recent years, with expenditures. The fees from the Environmental Laboratory Accreditation Program (ELAP) are deposited in this fund and have decreased in recent years.

VII. Center for Health Care Quality

The Center for Health Care Quality comprises Licensing and Certification (L&C) and Laboratory Field Services (LFS). The Center regulates the quality of care in public and private health facilities, clinics, and agencies; licenses nursing home administrators; certifies home health aides, certified nurse assistants, and other direct care staff; and licenses and inspects laboratory facilities and licenses laboratory personnel. Major budget adjustments include:

2011-12 Budget Adjustments

Licensing and Certification (L&C) Program November Estimate

\$936,000 TF
\$936,000 OF

The L&C November Estimate reflects an increase in State Operations expenditure authority from Reimbursements in the amount of \$936,000. This increase is based on an ongoing reimbursement contract with the Department of Health Care Services (DHCS) for which L&C provides services for certification of health care facilities as required by 42 Code of Federal Regulations (CFR) 431.610 and the Nurse Aid Training and Competency Evaluation Program (NATCEP) as required under the Medi-Cal Program.

2012-13 Budget Adjustments

Healthcare Associated Infections (HAI) Public Reporting

\$493,000 TF
\$493,000 OF

The Governor's Budget reflects an increase of \$493,000 in State Operations expenditure authority from the L&C Special Fund. These funds are to be used for four positions that will be redirected from within CDPH for the purposes of statutorily mandated public reporting of healthcare associated infections (HAIs) in California public hospitals.

Reduction of Preventable Medical Errors and Medication Errors

\$333,000 TF
\$333,000 OF

The Governor’s Budget reflects an increase of \$333,000 in State Operations expenditure authority from the Internal Departmental Quality Improvement Account (IDQIA) for the purposes of identifying solutions aimed at reducing preventable medical and medication errors in licensed health care facilities. This is part of a three year \$1.0 million project that L&C plans to contract for implementation of quality improvement activities to initiate and support ongoing efforts in reducing medical errors and their associated healthcare and human costs.

Licensing and Certification (L&C) Program November Estimate

\$936,000 TF
\$936,000 OF

The L&C November Estimate reflects an increase in State Operations expenditure authority from Reimbursements in the amount of \$936,000. This increase is based on an ongoing reimbursement contract with the DHCS for which L&C provides services for certification of health care facilities as required by 42 Code of Federal Regulations (CFR) 431.610 and the Nurse Aid Training and Competency Evaluation Program (NATCEP) as required under the Medi-Cal Program.

VIII. Additional CDPH Issues

2012-13 Budget Adjustments

Workforce Cap Plan Reductions

-26.0 Positions

[-\$14,239,000 TF]
[-\$2,684,000 GF]
[-\$11,555,000 OF]

The Governor’s Budget documents the current year 2011-12 reduction in authorized positions and State Operations funding previously implemented by the CDPH to implement Control Section 3.90 of the Budget Act of 2010 as required by the Budget Letters 10-31 and 10-38. The reductions are also known as the Work Force Cap (WFC) Plan. A total of 171.5 authorized positions were reduced as was associated funding of \$14.2 million for salaries and wages and operating expense & equipment from the CDPH budget. Out of the 171.5 positions, 26.0 positions have been abolished. The Department is proposing to retain and redirect 45.5 positions to current workload, provide position authority for previously approved Spring Finance Letters, provide position authority for other Budget Change Proposals, and convert existing contract positions to civil service positions. The remaining 100.0 positions are being redirected for the Budget Change Proposal “Blanket Position Conversion for Federal Special Projects and Reimbursements” to transition permanent civil service personnel from the

temporary help blanket into budgeted positions. These are permanent, ongoing reductions reflected in the 2012-13 Governor's Budget.

Transfer of Direct Service Programs to Department of Health Care Services

-33.6 Positions	-\$59,914,000 TF
State Operations	-\$3,868,000 GF
Local Assistance	-\$12,654,000 GF
State Operations	-\$8,156,000 OF
Local Assistance	-\$35,236,000 OF

The Governor's Budget establishes direct service and administrative efficiencies by transferring health care screening and treatment programs to the Department of Health Care Services (DHCS) from the Department of Public Health, whose mission is focused on public health prevention efforts. The budget proposes the transfer of three direct service programs from CDPH to DHCS. The programs that are affected include: the Every Woman Counts (EWC) Program, Prostrate Cancer Treatment Program, and Family Planning Access Care and Treatment (FPACT) Program. The reduction in expenditures as a result of this transfer is a total of \$12.0 million in State Operations and \$47.9 million in Local Assistance.

Office of Health Equity

3.0 Positions	\$2,214,000 TF
	-\$15,000 GF
	\$2,229,000 OF

The Governor's Budget reflects an augmentation in budget and position authority in State Operations to support the creation of the Office of Health Equity (OHE) in CDPH. The OHE will consist of the consolidation of several Offices and Units within CDPH, the DHCS, and the Department of Mental Health for a more comprehensive and integrative approach to better address issues of health disparity and promote healthy communities.

Transfer of Alcohol and Drug Programs to California Department of Public Health

34.0 Positions	\$12,002,000 TF
State Operations	\$8,002,000 OF
Local Assistance	\$4,000,000 OF

The Governor's Budget reflects the transfer of budget and position authority from the Department of Alcohol and Drug Program to CDPH for the Office of Problem Gambling (OPG), Narcotic Treatment Program (NTP), Driving-Under-the-Influence (DUI) Program, and the Counselor Certification activity. The OPG will be placed in the Center for Chronic Disease Prevention and Health Promotion and the other three activities will be placed in the Center for Health Care Quality. This transfer is reflective of the planned reorganization of activities within the California Health and Human Services Agency.

Blanket Position Conversion for Federal Special Projects and Reimbursements

348.0 Positions

\$0 TF

\$0 GF

\$0 OF

The Governor's Budget reflects the redirection and retention of 100.0 existing authorized positions from the Work Force Cap (WFC) Plan and to request 248.0 additional authorized positions in order to accommodate a total of 348.0 permanent staff now in the temporary help blanket. The "Blanket Position Conversion for Federal Special Projects (FSPs) and Reimbursements" proposal addresses the need to convert personnel hired for FSPs and reimbursement activities but currently placed in the temporary help blanket. It seeks to align the approved position authority for CDPH with the approved federal and reimbursement expenditures. The proposal will result in a more transparent budget and position information for the CDPH. One hundred percent of the funds for this proposal are already included in the CDPH budget.