

HB 5043 A BUDGET REPORT and MEASURE SUMMARY

Carrier: Rep. Nosse

Joint Committee On Ways and Means

Action Date: 06/04/21

Action: Do pass with amendments. (Printed A-Eng.)

House Vote

Yeas: 11 - Bynum, Drazan, Gomberg, Leif, McLain, Nosse, Rayfield, Sanchez, Smith G, Sollman, Stark

Senate Vote

Yeas: 12 - Anderson, Frederick, Girod, Golden, Gorsek, Hansell, Johnson, Knopp, Lieber, Steiner Hayward, Taylor, Thomsen

Prepared By: Patrick Heath and Ali Webb, Department of Administrative Services

Reviewed By: Tom MacDonald and Gregory Jolivette, Legislative Fiscal Office

Department of Human Services

2019-21

Oregon Health Authority

2019-21

Budget Summary*

	2019-21	2019-21	Committee Change from 2019-21	
	Legislatively Approved Budget ⁽¹⁾	Committee Recommendation	Committee Change from 2019-21 Leg. Approved	
			\$ Change	% Change
Oregon Department of Human Services				
General Fund	\$ 3,718,265,808	\$ 3,697,274,612	\$ (20,991,196)	-0.6%
General Fund Debt Service	\$ 21,294,053	\$ -	\$ -	0.0%
Other Funds Limited	\$ 839,002,062	\$ 833,690,344	\$ (5,311,718)	-0.6%
Federal Funds Limited	\$ 6,401,990,453	\$ 6,387,220,758	\$ (14,769,695)	-0.2%
Federal Funds Nonlimited	\$ 2,889,345,331	\$ -	\$ -	0.0%
Total	\$ 13,869,897,707	\$ 13,869,897,707	\$ (41,072,609)	-1.4%
Oregon Health Authority				
General Fund	\$ 2,578,141,819	\$ 2,402,627,556	\$ (175,514,263)	-6.8%
General Fund Cap Improve	\$ 753,070	\$ -	\$ -	0.0%
General Fund Debt Service	\$ 60,024,589	\$ 58,090,324	\$ (1,934,265)	-3.2%
Lottery Funds Ltd	\$ 17,999,344	\$ -	\$ -	0.0%
Other Funds Cap Improve	\$ 753,070	\$ -	\$ -	0.0%
Other Funds Non-Ltd	\$ 42,805,127	\$ -	\$ -	0.0%
Other Funds Debt Svc Non-Ltd	\$ 232,064,776	\$ -	\$ -	0.0%
Other Funds Limited	\$ 8,012,542,177	\$ 8,006,734,768	\$ (5,807,409)	-0.1%
Other Funds Debt Svc Ltd	\$ 224,985	\$ -	\$ -	0.0%
Federal Funds Non-Ltd	\$ 102,729,051	\$ -	\$ -	0.0%
Federal Funds Debt Svc NL	\$ 3,467,210	\$ -	\$ -	0.0%
Federal Funds Limited	\$ 14,091,471,331	\$ 14,258,792,689	\$ 167,321,358	1.2%
Total	\$ 25,142,976,549	\$ 24,726,245,337	\$ (15,934,579)	-8.9%

Position Summary

Oregon Department of Human Services				
Authorized Positions	9,574	9,574	0	0.0%
Full-time Equivalent (FTE) positions	9,365.74	9,365.74	0.00	0.0%
Oregon Health Authority				
Authorized Positions	4,381	4,380	(1.00)	0.0%
Full-time Equivalent (FTE) positions	4,316.87	4,316.62	(0.25)	0.0%

⁽¹⁾ Includes adjustments through January 2021

* Excludes Capital Construction expenditures

Summary of Revenue Changes

House Bill 5043 rebalances the 2019-21 budgets for the Oregon Department of Human Services (ODHS) and the Oregon Health Authority (OHA). OHA programs are funded with a mix of General Fund, Lottery Funds, Other Funds and Federal Funds. ODHS programs are funded with a combination of General Fund, Other Funds and Federal Funds.

The approved rebalance includes increases to OHA's Federal Funds revenues, which support the Oregon Health Plan, specifically through the extension of the COVID-19 public health emergency by the federal government and the corresponding 6.2% enhanced federal match rate the state receives on Medicaid expenditures. The approved rebalance also includes changes to federal reimbursement for COVID-19 vaccine administration approved as part of the American Rescue Plan Act.

Summary of Human Services Subcommittee Action

The Human Services Subcommittee recommended a budget rebalance that supports ODHS and OHA programs and operations for the remainder of the 2019-21 biennium. The rebalance reflects program cost increases and savings, revenue changes, and technical adjustments needed to ensure ODHS' and OHA's budgets remains in balance. Across both agencies, the recommended rebalance reduces General Fund by \$198,439,724, reduces Other Funds expenditure limitation by \$11,119,127, and increases Federal Funds expenditure by \$152,551,663.

Oregon Department of Human Services

The Human Services Subcommittee recommended rebalance for ODHS decreases General Fund by \$20,991,196, decreases Other Funds expenditure limitation by \$5,311,718 and decreases Federal Funds expenditure limitation by \$14,769,695.

Self Sufficiency Programs

The rebalance recommended by the Subcommittee includes a savings within the Self Sufficiency Programs (SSP) of \$5.2 million General Fund, \$1.0 million Other Funds and \$15.1 million Federal Funds due to caseload savings, primarily within the Temporary Assistance for Needy Families (TANF) caseloads.

The savings in SSP are generated by decreases in projected caseloads, which reflects the change between the Fall 2020 and the Spring 2021 caseload forecasts. The primary driver of the General Fund savings is a projected 11% decrease in the TANF UN (two-parent household) caseload, as well as a 4% decrease in the Pre-Supplemental Security Income caseload. The drivers for the Other Funds and Federal Funds savings are an 8% decrease in the TANF Basic program caseload. The TANF UN program is almost entirely funded with General Fund, while other caseloads have a mix of Other Funds and Federal Funds, in addition to General Fund.

Child Welfare

The rebalance recommended by the Subcommittee includes a savings within Child Welfare Programs of \$36.5 million General Fund, \$5.8 million Other Funds and \$23.0 million Federal Funds due to expected caseload decreases, underutilization of residential treatment beds, and an updated cost estimate for educational supports, among others.

Caseload decreases in the Wellbeing and Permanency programs generated a savings of \$5.6 million General Fund, \$0.2 million Other Funds and \$2.0 million Federal Funds. Within the Wellbeing caseload, the Residential Treatment and the Focused Opportunities for Children Utilizing Services (FOCUS) populations are projected to decrease by 3% and 23%, respectively, compared to the Fall 2020 caseload.

A one-time savings of approximately \$6.7 million General Fund is projected due to lower expected costs for 1:1 Educational Supports for distance learning in the Residential Treatment program. The January 2021 Emergency Board appropriated \$7.5 million General Fund for educational supports; however, the actual costs are expected to be significantly lower due to a correction in the projected cost estimate.

The Residential Treatment program has projected a one-time savings of \$7.8 million General Fund, \$5.2 million Other Funds and \$16.8 million Federal Funds due to the underutilization of residential treatment beds. The number of vacant beds is currently estimated at approximately 121 beds.

The Enhanced Therapeutic Foster Care program projects a one-time savings of \$2.4 million General Fund, \$0.4 million Other Funds and \$4.2 million Federal Funds. SB 1 (2019) provided \$3.5 million General Fund (\$8.5 million total funds) for the program, however the service contract associated with the funding was not finalized until late in the 2019-21 biennium. The contract will be in place for the full 2021-23 biennium.

The Wellbeing program projects one-time savings of \$5.1 million General Fund due to lower actual expenditures versus budgeted expenditures in the Transportation, Independent Living Services, Other Medical, Family of Origin and Interstate Compact programs. The savings is primarily related to the Other Medical expenses category and includes medical expenses not covered by the Oregon Health Plan, but are necessary to ensure the safety of children, such as parental hair follicle testing to determine the presence of prohibited substances. Actual expenditures have been lower than budgeted expenditures due to the COVID-19 pandemic and its impacts on demand for services.

The Safety program expects one-time savings of \$6.7 million General Fund due to lower actual expenditures versus budgeted expenditures in the Family Support Teams, Recovering Family Mutual Homes, In-Home Safety and Reunification Services (ISRS), and Strengthening, Preserving and Reunifying Families (SPRF) programs. The majority of savings is due to higher than expected unspent Title IV-E Waiver federal funds in the SPRF program, which offsets the General Fund. In the other programs, actual expenditures have been lower than budgeted expenditures due to the COVID-19 pandemic and its impacts on demand for services.

The Permanency program anticipates one-time savings of \$2.2 million General Fund due to lower actual expenditures versus budgeted expenditures in the Contracted Adoption Services, Post Adoption and Private Adoption Services programs. Actual expenditures have been lower than budgeted expenditures due to the COVID-19 pandemic and its impacts on demand for services.

Aging and People with Disabilities

The rebalance recommended by the Subcommittee includes a savings within the Aging and People with Disabilities program of \$1.9 million General Fund and \$3.7 million in Federal Funds expenditure limitation to reflect caseload changes between the Fall 2020 and Spring 2021 caseload forecasts.

The Community-Based Care total caseload is projected to have a slight decrease of 0.5% on a net basis and represents the bulk of the caseload savings. The Adult Foster Care caseload is the only caseload projected to increase, by about 1%, and the most significant caseload decrease was in the Program for All-Inclusive Care for the Elderly (PACE) program at 2%. The Nursing Facilities and In-Home Care caseloads have slight percentage decreases and approximately net to zero on a dollar value basis.

Intellectual and Developmental Disabilities

The Subcommittee recommended an increase of \$12.7 million General Fund and \$25.0 million in Federal Funds expenditure limitation for projected increases in caseload and cost per case, as well as increased nursing services costs, in the Intellectual and Developmental Disabilities programs. The caseload impact is due to changes between the Fall 2020 and Spring 2021 caseload forecasts.

Increased costs associated with caseload changes result in an increase of \$9.7 million General Fund and an increase of \$19.1 million in Federal Funds expenditure limitation. The primary cost driver is related to a 2.5% increase in the Adult In-Home Supports caseload, resulting in additional costs of \$6.1 million General Fund and \$12.4 million Federal Funds. A secondary cost driver is a 4.6% increase in the Children's In-Home Supports caseload, which results in additional costs of \$2.5 million General Fund and \$5.1 million Federal Funds. Other cost increases are due to increases in the Adult In-Home Supports, Adult Supported Living Services, Day Support Activities and Employment Services caseloads. The remaining caseloads are projected to slightly decrease and result in caseload savings.

In addition to caseload changes, the rebalance plan includes cost per case changes resulting in a net increase of \$1.7 million General Fund and \$3.3 million Federal Funds. The cost per case for most programs has decreased; however, a significant increase is projected in the Children's In-Home Supports and Children's Intensive In-Home Supports cost per case due to people preferring to receive services from agencies, instead of Personal Support Workers, as well as overtime costs.

Additional Nursing Services costs of \$1.3 million General Fund and \$2.6 million Federal Funds are expected due to rate increases for Registered Nurses (RNs), Licensed Practical Nurses (LPNs) and Licensed Vocational Nurses (LVNs). In January 2020, RNs received a 3.8% rate increase and

LPNs/LVNs received a 10% rate increase. In addition, demand for RN services increased by 8.25% over the amount provided in the 2017-19 biennium and demand for LPN/LVN services decreased by 2.8% over the same time period.

Central Services, Shared Services, State Assessments and Enterprise-Wide Costs (SAEC)

The Subcommittee recommended one-time increases in General Fund of \$9.9 million, an increase of Other Funds expenditure limitation of \$1.5 million and an increase of Federal Funds expenditure limitation of approximately \$2 million in the Central Services, Shared Services and SAEC programs for additional expenses in the 2019-21 biennium related to wildfire, computer and scanner costs.

The recommended rebalance plan includes a one-time increase of \$6.8 million General Fund in the Central Services unit to support victims of the September 2020 wildfires with sheltering, feeding, wraparound and disaster case management services. The Department estimates the total wildfire costs for the 2019-21 biennium will be approximately \$100 million General Fund. This estimate assumes potential federal funding from the Federal Emergency Management Agency (FEMA) will not be received in the 2019-21 biennium. The Legislature previously appropriated \$93.2 million General Fund for wildfire response costs through HB 5042 (2021) and the meeting of the January 8, 2021 Emergency Board, resulting in a projected shortfall of \$6.8 million General Fund.

A one-time increase of \$2.2 million General Fund and an increase of \$1.5 million Federal Funds expenditure limitation is recommended in the SAEC program to purchase 2,000 laptops and 1,000 docking stations to resume the Department's lifecycle replacement plan. The purchases will provide flexibility to enable staff to work remotely. The Department estimates over 5,700 desktop computers and 700 laptops are near their end of life.

The recommended rebalance also includes a one-time increase of \$1.5 million Other Funds expenditure limitation in the Imaging and Records Management Services (IRMS) program within the Shared Services unit for the replacement of scanners. The scanners are nearing their end of life. This investment will allow the Department to purchase four high-production scanners, four high-end desktop scanners and two warehouse desktop scanners (10 in total). The replacement of scanners will enable the Department to better comply with record retention laws. A corresponding one-time increase of \$0.9 million General Fund and an increase of \$0.6 million Federal Funds expenditure limitation was recommended in the SAEC division related to the Shared Services Funding component for the scanner replacement purchases.

Oregon Health Authority

The Human Services Subcommittee recommended rebalance for OHA includes a net \$177,448,528 General Fund reduction, a decrease in Other Funds expenditure limitation of \$5,807,409, an increase in Federal Funds expenditure limitation of \$167,321,358, and the elimination of one position (0.25 FTE) to update OHA's budget for actual expenditures through March 2021 and projected expenditures through the remainder of the 2019-21 biennium.

Health Systems Division

The Health Systems Division projects a \$53,057,663 General Fund need and \$237,173,245 in General Fund savings for a net of \$184,115,582 in General Fund savings.

Oregon Health Plan Caseload Forecast –The Spring 2021 Caseload forecast results in additional costs of \$53,057,663 General Fund and \$161,497,392 Federal Funds in 2019-21. There are two main factors driving the growth in caseload costs over the prior caseload forecast. First, due to the extension of the COVID-19 public health emergency, and as a condition of receiving the enhanced federal match rate, OHA has stopped most activity to redetermine whether clients on the caseload remain eligible for the Oregon Health Plan. As a result, OHA’s caseload has grown by approximately 15,000 cases per month since the beginning of the pandemic. This growth is projected to taper off but the caseload is not projected to peak until July 2022, also creating a substantial budget impact in 2021-23. OHA estimates it will take up to six months to complete redeterminations after the public health emergency ends.

A second factor affecting OHA’s caseload cost in 2019-21 is the conversion of data from OHA’s legacy system to the new ONE / Integrated Eligibility system. An initial round of data conversions began in Fall 2020 and transfers were complete in Spring 2020. These data conversions and the application of the new system’s eligibility rules have led to the transfer of clients across eligibility groups. The main budgetary impact of these moves has been to elevate transfers from the Children’s Medicaid and Affordable Care Act Adults eligibility groups to the Aged, Blind and Disabled, and Old Age Assistance eligibility groups. While the transfers have not resulted in additional cases, the cost of serving a client in the former eligibility group is generally lower than serving a client in the latter, resulting in a net fiscal impact from the transfers.

COVID-19 Enhanced Medicaid Match – Congress added an additional 6.2 percent to the Medicaid match rate and 4.34 percent to the Children’s Health Insurance Program (CHIP) match rate for each quarter that the COVID-19 public health emergency declaration is in place. The enhanced match rate is currently included in the Health Systems Division budget through the end of December 2020. The federal government has announced plans to extend the public health emergency through January 2022, resulting in savings of \$151,622,663 General Fund and \$5,807,409 Other Funds in the 2019-21 biennium.

Medicaid Savings – OHA projects it will spend \$78,982,051 General Fund and \$144,317,214 Federal Funds less than budgeted in 2019-21 for the Medicaid program, as the COVID-19 pandemic has affected medical utilization and also due to changes in federal policy in the following areas:

- **Fee-For-Service:** OHA is projecting savings of \$14.9 million General Fund and \$42.6 million Federal Funds due to a decrease in the fee-for-service cost per case. The COVID-19 pandemic has led to a reduction in hospital services and also closed or limited services in some medical and dental offices. Due to the end of eligibility redeterminations, there has also been reduced churn in this part of the caseload, meaning clients on average, have lower medical needs than they otherwise would have.

- Medicare Part B premiums: OHA is projecting savings of \$15.8 million General Fund and \$24.6 million Federal Funds for Medicare Part B premium payments OHA makes on behalf of its partial dual eligible clients due to premium increases coming in lower than budgeted.
- Medicare Part D Clawback Payments: OHA is projecting savings of \$13.3 million General Fund for Medicare Part D clawback payments that OHA pays to the federal government on behalf of its full dual eligible clients. The increases in Oregon’s federal match rate, due to the COVID-19 pandemic and lower than budgeted Part D rate growth, result in savings.
- Coordinated Care Organization capitation payments: OHA is projecting savings of \$35.0 million General Fund and \$77.1 million Federal Funds as actual expenditures for CCO base rate payments and CCO maternity utilization are lower than budgeted.

COVID-19 Vaccine Administration Savings – The January 2021 Emergency Board allocated \$3 million General Fund to the Health Systems Division to cover the costs of administering COVID-19 vaccines to populations served by OHA for the last six months of the biennium. With the passage of the American Rescue Plan Act of 2021, the federal government will pay 100 percent of the cost of vaccine administration starting April 1, 2021, leading to a projected savings of \$1.5 million General Fund and \$4.5 million Federal Funds.

Administrative Savings – OHA has identified \$2,468,531 General Fund in one-time savings in administrative costs. These savings include Coronavirus Relief Fund money used to cover payroll costs for staff supporting the pandemic response, a delay in the Compass project due to a delay in federal approval for the work, unused budget for travel and vacancy savings.

Aid and Assist Savings – The Legislature approved House Bill 5042 (2021), which among other items, included \$5.2 million General Fund for a series of investments aimed at addressing the influx of patients to the Oregon State Hospital and in the community, who are unable to aid and assist in their own defense at trial (Aid and Assist patients). Of the amounts approved, OHA projects it will not be able to spend \$500,000 the Legislature approved for a contract with Program Design and Evaluation Services and \$2.1 million approved to expand Secure Residential Treatment Facility capacity before the end of the 2019-21 biennium and is recognizing these items as a savings in its 2019-21 budget.

Oregon State Hospital

The Oregon State Hospital projects \$13,228,896 in General Fund challenges and \$3,071,728 in General Fund savings for a net of \$10,157,168 in General Fund need.

COVID-19 Expenses – OHA is projecting a need of up to \$13,228,896 General Fund to address its unreimbursed expenses from responding to COVID-19 at the Oregon State Hospital. These expenses are primarily from regular and overtime wages for COVID-19 activities, including the operation of screening stations and units to serve patients who either tested positive for having the virus or were determined to be potentially infected following a screening, as well as the need to fill behind staff taking leave due to COVID-19 exposure or to provide childcare. The hospital has also incurred additional costs for personal protective equipment and other supplies. OHA estimates COVID-19 related expenses will reach

\$27.3 million in 2019-21; these amounts are offset by funding from the Coronavirus Aid, Relief, and Economic Security (CARES) Act and pending FEMA reimbursement totaling \$14.1 million.

Medicaid Recoupment Savings – The OHA Office of Program Integrity completed a series of hospital payment audits based on claims processed by the Medicaid Management Information System (MMIS). The audits determined the Oregon State Hospital was overpaid by the federal government due to systemic issues within MMIS as well as the hospital’s billing and documentation processes by a total of \$7,061,305 for the years reviewed. Prior to the finalization of the audits the Legislature provided \$8,148,865 General Fund relief for these overpayments through Senate Bill 5723 during the August Special Session, leaving a savings of \$1,087,560 General Fund.

Rivers Run Program Discontinuation – The Oregon State Hospital opened the 16-bed Rivers Run Residential Treatment Facility in July 2019 to provide capacity to treat Aid and Assist patients. The hospital used the additional 16 beds to transition civilly committed patients into a lower level of care, freeing up bed space for Aid and Assist patients on the Salem campus for patients who needed a hospital level of care. As the influx of Aid and Assist patients has continued there has been a decline in the population of patients who are civilly committed at the state hospital, meaning there are no longer enough civilly committed patients to keep the program open. Due to a lack of patients, in April 2021 the Oregon State Hospital discharged its last four patients from Rivers Run into the community and closed the facility. This action results in \$1,984,168 in General Fund savings during the 2019-21 biennium.

Health Policy and Analytics

OHA is projecting a one-time \$1,405,849 General Fund savings due to Coronavirus Relief Fund reimbursements for staff time in Health Policy and Analytics, the suspension of the Client Quality Metrics Registry and Provider Directory programs, vacancy savings, and underspending of other services and supplies budgets.

Public Health Division

Domestic Well Testing – OHA is projecting \$150,000 General Fund savings in the Domestic Well Testing program. The program received \$600,000 General Fund from the October 12, 2020 meeting of the Emergency Board to test domestic wells in areas of Oregon affected by the Fall 2020 wildfires (as well as \$150,000 for small water system testing). Domestic well testing has been slower than anticipated due a delay in ash and debris removal necessary before the tests are performed.

Environmental Public Health Grant – OHA is projecting a \$67,753 Federal Funds savings and a reduction of one position (0.25 FTE) in the Public Health division. The program received one year funding instead of the requested five year funding from a Centers for Disease Prevention and Control grant to support environmental public health capacity; the grant will no longer be able to support a permanent position.

Debt Service

OHA is projecting \$1,934,265 in General Fund savings due to a Department of Administrative Services action to refinance several series of bonds used to build the Oregon State Hospital campuses in Salem and Junction City. The \$1.9 million represents an interest reserve account no longer needed due to the completion of the bonds refinancing, which was not captured through prior legislative budget adjustments.

DETAIL OF JOINT COMMITTEE ON WAYS AND MEANS ACTION

Oregon Department of Human Services and Oregon Health Authority
 Ali Webb - 503-400-4747 and Patrick Heath - 503-983-8670

DESCRIPTION	GENERAL FUND	LOTTERY FUNDS	OTHER FUNDS		FEDERAL FUNDS		TOTAL ALL FUNDS	POS	FTE
			LIMITED	NONLIMITED	LIMITED	NONLIMITED			
SUBCOMMITTEE ADJUSTMENTS (from LAB)									
Oregon Department of Human Services									
SCR 010-40 - Central Services									
Services and Supplies	\$ 6,799,794	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 6,799,794		
SCR 010-45 - Shared Services									
Services and Supplies	\$ -	\$ -	\$ 1,451,699	\$ -	\$ -	\$ -	\$ 1,451,699		
SCR 010-50 - State Assessments and Enterprise-wide Costs									
Services and Supplies	\$ 2,190,600	\$ -	\$ -	\$ -	\$ 1,460,400	\$ -	\$ 3,651,000		
Other Special Payments	\$ 871,019	\$ -	\$ -	\$ -	\$ 580,680	\$ -	\$ 1,451,699		
SCR 060-01 - Self Sufficiency Programs									
Special Payments to Individuals	\$ (5,190,224)	\$ -	\$ (946,229)	\$ -	\$ (15,137,677)	\$ -	\$ (21,274,130)		
SCR 060-08 - Aging and People with Disabilities									
Special Payments to Individuals	\$ (1,924,524)	\$ -	\$ -	\$ -	\$ (3,741,209)	\$ -	\$ (5,665,733)		
SCR 060-09 - Intellectual and Developmental Disabilities									
Other Special Payments	\$ 12,739,470	\$ -	\$ -	\$ -	\$ 25,041,285	\$ -	\$ 37,780,755		
SCR 060-02 - Safety									
Special Payments to Individuals	\$ (1,940,888)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ (1,940,888)		
Special Payments to Contracted Service Providers	\$ (2,044,980)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ (2,044,980)		
Other Special Payments	\$ (2,695,524)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ (2,695,524)		
SCR 060-03 - Wellbeing									
Special Payments to Other Governmental Units	\$ 72,635	\$ -	\$ -	\$ -	\$ 127,455	\$ -	\$ 200,090		
Special Payments to Individuals	\$ (12,490,547)	\$ -	\$ (1,817,088)	\$ -	\$ (21,105,188)	\$ -	\$ (35,412,823)		
Special Payments to Contracted Service Providers	\$ 12,149	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 12,149		
Other Special Payments	\$ (14,842,009)	\$ -	\$ (4,000,100)	\$ -	\$ (1,651,595)	\$ -	\$ (20,493,704)		
SCR 060-04 - Permanency									
Special Payments to Individuals	\$ 20,014	\$ -	\$ -	\$ -	\$ 26,047	\$ -	\$ 46,061		
Other Special Payments	\$ (2,568,181)	\$ -	\$ -	\$ -	\$ (369,893)	\$ -	\$ (2,938,074)		
Oregon Health Authority									
SCR 10-50 - Debt Service									
Debt Service	\$ (1,934,265)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ (1,934,265)		
SCR 030-01 - Health Systems Division									
Personal Services	\$ (1,052,333)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ (1,052,333)	0	0.00
Services and Supplies	\$ (1,416,198)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ (1,416,198)		
Special Payments to Counties	\$ (6,525,266)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ (6,525,266)		
Special Payments to Individuals	\$ (175,121,785)	\$ -	\$ (5,807,409)	\$ -	\$ 170,110,340	\$ -	\$ (10,818,854)		
Other Special Payments	\$ -	\$ -	\$ (42,884)	\$ -	\$ -	\$ -	\$ (42,884)		

DESCRIPTION	GENERAL FUND	LOTTERY FUNDS	OTHER FUNDS		FEDERAL FUNDS		TOTAL ALL FUNDS	POS	FTE
			LIMITED	NONLIMITED	LIMITED	NONLIMITED			
SCR 030-02 - Health Policy and Analytics									
Personal Services	\$ (1,024,536)	\$ -	\$ -	\$ -	\$ -	\$ -	(1,024,536)	0	0.00
Services and Supplies	\$ (381,313)	\$ -	\$ -	\$ -	\$ (2,721,229)	\$ -	(3,102,542)		
SCR 030-05 - Public Health									
Personal Services	\$ -	\$ -	\$ -	\$ -	\$ (50,198)	\$ -	(50,198)	(1)	(0.25)
Services and Supplies	\$ (150,000)	\$ -	\$ -	\$ -	\$ (17,555)	\$ -	(167,555)		
Other Special Payments	\$ -	\$ -	\$ 42,884	\$ -	\$ -	\$ -	42,884		
SCR 030-06 - Oregon State Hospital									
Personal Services	\$ 9,760,570	\$ -	\$ -	\$ -	\$ -	\$ -	9,760,570	0	0.00
Services and Supplies	\$ 1,521,284	\$ -	\$ -	\$ -	\$ -	\$ -	1,521,284		
Other Special Payments	\$ (1,124,686)	\$ -	\$ -	\$ -	\$ -	\$ -	(1,124,686)		
TOTAL ADJUSTMENTS	\$ (198,439,724)	\$ -	\$ (11,119,127)	\$ -	\$ 152,551,663	\$ -	(57,007,188)	(1)	(0.25)
SUBCOMMITTEE RECOMMENDATION	\$ (198,439,724)	\$ -	\$ (11,119,127)	\$ -	\$ 152,551,663	\$ -	(57,007,188)	(1)	(0.25)