

DEPARTMENT OF HEALTH

MISSION

The Department of Health strives to ensure that high quality, appropriate health services are available to all New York State residents at a reasonable cost. Department functions and responsibilities include:

- Promoting and supervising public health activities throughout the State;
- Ensuring sound and cost-effective quality medical care for all residents; and,
- Reducing infectious diseases such as tuberculosis, measles, mumps and rubella and chronic disabling illnesses such as heart disease, cancer, stroke and respiratory diseases.

The Department of Health is also the principal State agency that interacts with the Federal and local governments, health care providers and program participants for the State's Medicaid program.

ORGANIZATION AND STAFFING

Under the direction of the Commissioner, the Department of Health meets its responsibilities through the Office of Medicaid Management, the Office of Managed Care, the Office of Continuing Care, the centers located in the Office of Public Health, and the Office of Health Systems Management. These entities provide policy and management direction to the Department's system of regional offices. Department staff located in regional offices conduct health facility surveillance, public health monitoring and direct services, and oversee county health department activities.

Additionally, the Department is responsible for five health care facilities engaged in advanced medical research and patient care including the Roswell Park Cancer Institute in Buffalo, the Helen Hayes Hospital in West Haverstraw, and three nursing homes for the care of veterans and their dependents in Oxford, New York City and Batavia. In fiscal year 2000-01, construction is expected to be substantially complete on a fourth veterans' nursing home located in Montrose. In early 1999, responsibility for the operations of the Roswell Park Cancer Institute was transferred to a public benefit corporation, the Roswell Park Cancer Institute Corporation, pursuant to an operating agreement between the Corporation and the Department. This has provided Roswell with the flexibility needed to compete more effectively in a changing health care environment.

In fiscal year 2000-01, the Department of Health will have a workforce of approximately 6,000 positions, with almost twenty-four percent of those positions employed in the Department's health care facilities. Since 1995-96, the number of positions has decreased by approximately 800, reflecting the transfer to the Department of more than 950 positions for Medicaid program and audit activities, and new program initiatives such as the safe drinking water program, offset by the impact of attrition, early retirements, and Roswell Park Cancer Institute's transition to a public benefit corporation.

- Approximately 23 percent of these positions are paid exclusively by the General Fund;
- 9 percent are directly supported by fees;
- 52 percent are supported by third party, private patient care and Federal reimbursement; and,
- The remaining 16 percent are directly funded by Federal grants.

MEDICAID

Total Medicaid spending in New York will be approximately \$30.9 billion next year. The 2000-01 Medicaid budget reflects a continued commitment to an effective and affordable delivery system that promotes quality health care, protects patients, and assures access to appropriate services to meet the health care needs of the State's neediest residents.

Acute Care

State Medicaid spending for hospitals and clinics will reach \$2 billion in 2000-01. Hospitals will continue to rely on the landmark Health Care Reform Act (HCRA), originally enacted in 1996, as the basis for their funding. HCRA, which was extended in 1999 for another three and one-half years, encourages competition in the health care industry by allowing most non-Medicaid payors to negotiate rates with hospitals.

The Health Care Reform Act of 2000 (HCRA 2000) — successor legislation to the landmark Health Care Reform Act of 1996 — continues, through March 31, 2003, cost containment actions enacted as part of prior year Budgets. In addition, HCRA 2000 continues to provide hospitals and clinics with adequate funding to ensure that quality health care services are accessible and affordable for all New Yorkers.

Long-Term Care

State Medicaid expenditures on long-term care services — nursing home and community-based home care — will be \$3.3 billion in 2000-01.

Progress continues to be made in implementing the provisions of the Long-Term Care Integration and Finance Act of 1997. Continuing Care Retirement Communities are providing the elderly with more affordable and accessible options for comprehensive, independent living arrangements that include a wide array of home care, nursing care and other medical services. The rapidly growing Managed Long Term Care program is developing a broader and more integrated continuum of long term care service options.

In addition, the Partnership for Long Term Care is providing long term care insurance that protects individuals from having to spend down their assets to qualify for Medicaid in the event of a lengthy illness. This innovative Partnership, used in three other states, now represents a significant portion of the New York's long term care insurance market.

Managed Care

The 2000-01 budget reflects the continued mandatory enrollment of Medicaid recipients in managed care. Federal approval of New York's 1115 managed care waiver in July 1997 set the stage for mandatory enrollment to commence in October 1997. To date, sections of New York City and thirteen upstate counties — Albany, Broome, Columbia, Erie, Greene, Monroe, Niagara, Onondaga, Ontario, Oswego, Rensselaer, Saratoga and Westchester — are operating mandatory managed care programs. New York City will continue to phase in managed care, by zip code, in five phases with a four-month lag between each phase. The remainder of the State will also phase in at four-month intervals subject to Federal approval.

During the first half of 1999-2000, voluntary enrollment remained nearly level. Enrollment is projected to reach approximately 781,000 by the end of 1999-2000 and 1.4 million by the end of 2000-01. When fully implemented, approximately three-quarters of all Medicaid recipients are expected to be enrolled in mandatory managed care. As a result of existing managed care enrollment, New York State continues to have increased primary care use, lower emergency room use, and fewer inpatient days.

The State's Medicaid Managed Care program ensures that the neediest people receive high quality, accessible health care. Legislation passed in 1996 authorizes the State to certify special managed care plans to provide comprehensive services to individuals infected with the HIV virus or who have a serious mental illness. These Special Needs Plans will begin operation in 2000-01. Start-up grant funding will be provided to facilitate implementation of these plans. Medicaid Managed Care also incorporates a comprehensive set of consumer protections to ensure that recipients obtain enrollment assistance and quality care, and understand their rights and responsibilities under managed care plans.

Medicaid Administration

The Department of Health is responsible for overall management of the Medicaid program including the State's interaction with Federal and local governments, health care providers and Medicaid recipients. Counties will continue their role in making Medicaid eligibility determinations. Payments to health care providers also continue to be made through the State's computerized Medicaid Management Information System (MMIS) which is operated by a private agency with oversight by State personnel. The Department has re-procured management and development services for a Replacement Medicaid System (RMS) to replace both MMIS and the Electronic Medicaid Eligibility Verification System (EMEVS). The RMS will replace out-of-date technology and bring New York State into compliance with new Federal reporting requirements. In addition, the new system will substantially enhance front-end detection of Medicaid fraud.

CHILD HEALTH PLUS

New York's Child Health Plus program continues to set a national standard for children's health insurance coverage for children up to age 19. The Child Health Plus program was significantly expanded with passage of legislation under Governor Pataki's leadership in both 1996 and 1998, and resulted in a dramatic increase in enrollment. The program has expanded to include comprehensive health benefits, Medicaid coverage for 15 to 19 year olds and, beginning July 2000, eligibility is raised to 250 percent of the Federal Poverty Level.

New York is eligible for approximately \$305 million in Federal funds in 2000-01. These funds, when combined with State Health Care Reform Act (HCRA) moneys, will facilitate access to comprehensive Child Health Plus coverage to virtually all eligible children in our State.

OTHER PUBLIC HEALTH PROGRAMS

Excluding Medicaid program costs, General Fund appropriations finance 32 percent of the Department of Health's budget in 1999-2000, down from a high of 62 percent in the mid-1980's.

Other revenue, including 1) reimbursement for patient care provided at the Department's health care facilities; 2) regulatory fees and audit recoveries; 3) management fees for hospital and nursing home construction projects financed through bond proceeds; and, 4) registration, testing and certification fees for various public health services, support 28 percent of the Department of Health's budget, including the Professional Medical Conduct Program, clinical and environmental laboratory certification activities, and health care facilities' operating costs. The remaining 40 percent is provided by Federal grants and Fiduciary and Enterprise funds.

Capital Projects appropriations preserve and maintain the Department's hospitals, nursing homes and the three separate laboratory facilities in Albany County which constitute the Wadsworth Center for Laboratories and Research. The costs of projects at the health care facilities are funded from facility revenues and/or the General Fund.

HEALTH

This overall recommendation ensures that public health priorities are preserved. As such, the 2000-01 budget:

- Includes \$6.5 million, growing to \$13.1 million in 2001-02 — generated from new water supply connection fees — for an initiative to ensure drinking water safety by expanding State and local surveillance of public water supplies.
- Maintains State funding at current levels of over \$14.1 million for critical public health needs including school health, lead poisoning prevention, breast cancer detection and prenatal care.
- Sustains the State's commitment to fighting the AIDS epidemic by continuing statewide spending at more than \$2 billion, including \$106.1 million to be spent by the AIDS Institute. Emphasis will continue to be placed on prevention and specialized services which target resources to populations with the greatest risk of infection. In 2000-01, \$23.7 million in Institute programs will be financed from HCRA funds.
- Includes approximately \$165 million to reimburse counties and New York City for providing public health services such as childhood immunizations, primary health care, and control of communicable diseases such as tuberculosis and sexually-transmitted diseases. To promote efficient local operations, appropriation language will generally limit reimbursement to counties to prior year spending as adjusted for inflation.
- Includes more than \$40 million, funded largely from HCRA, for an enhanced anti-smoking program including counter advertising, community and school-based education programs, cancer mapping and strict enforcement of laws regulating the sale and use of tobacco products.
- Supports the optional State supplementation of the Federal nutrition assistance program for women, infants and children (WIC) with \$28 million. New York continues to be one of only thirteen states to augment Federal nutrition funds.
- Continues the Elderly Pharmaceutical Insurance Coverage program, which will help approximately 122,500 elderly persons next year with their out-of-pocket prescription expenses. For 2000-01, EPIC's costs will be financed from the HCRA funds.
- Promotes program and cost efficiencies in the \$135 million Early Intervention program serving infants and toddlers under the age of three who have developmental delays.
- Continues funding of \$14.9 million from all sources for programs to promote sexual abstinence among adolescents, including \$7.7 million suballocated from the Office of Children and Family Services.
- Adds new funding of \$2.5 million to prevent the potential spread of the West Nile virus and to respond to other "West Nile like" events. These funds will support epidemiology, surveillance and laboratory testing staff as well as equipment and other needs.
- Adds new funding of \$5 million to expand New York's newborn screening program to keep pace with advances in science. Genetic and other medical research is making it possible to diagnose an increasing number of treatable, yet potentially life threatening, disorders.

PROGRAM HIGHLIGHTS

MEDICAID

Originally established in 1965 by the Federal government as a health insurance program for the poor, New York's Medicaid program grew to \$29.5 billion in 1999-2000, providing coverage to approximately 3.1 million New Yorkers. In addition to the federally-mandated services — inpatient and outpatient hospital care, nursing facility care, physician services,

home health care, family planning, laboratory and x-ray services — New York also provides almost all federally permissible optional services.

Traditionally, the Federal government has paid for 50 percent of the State's Medicaid program. The State pays about 35 percent of the remaining costs and counties pay about 15 percent. The Federal government has matched, on an unlimited basis, each State dollar expended on Medicaid.

ACCESS TO QUALITY HEALTH CARE

The Department develops and implements programs to ensure that residents of New York have access to high quality health care. Over the last four years, significant legislation has been enacted that will enhance the availability of appropriate care to all New Yorkers:

- The landmark Health Care Reform Act of 1996 deregulated inpatient hospital reimbursement and introduced a market-based system which allows commercial insurers, managed care entities and self-insured plans to establish rates of payment directly through negotiations with hospitals and without State intervention. The HCRA successor legislation (HCRA 2000), enacted in 1999, retains the State's commitment to ensuring that the hospital system adapts to the changing health care environment. In addition, HCRA 2000 provides comprehensive new programs for the uninsured.
- Pioneering Consumer Managed Care legislation enacted in 1996 — the Managed Care Bill of Rights — ensures that consumers will be appropriately informed about managed care choices, benefits and guarantees that providers can discuss all appropriate health care options.
- Enhanced consumer protections were added in External Review legislation enacted in 1998 which provide health plan enrollees the opportunity to request an external appeal when coverage of health care services is denied on the grounds that the service is not medically necessary, or that it is experimental or investigational.
- The Long-Term Care Integration and Finance Act of 1997 authorizes various managed long-term care models for evaluation, expands service options, increases available financing streams for long-term care, and ensures the tax deductibility of long-term care insurance.

PUBLIC HEALTH

Efforts such as education, research and prevention of injuries and disease are aimed at improving the health of all New Yorkers. Particular focus is placed on nutrition, prenatal and perinatal care, child health, treatment and control of sexually transmitted diseases and tuberculosis, childhood immunization, the health risks of environmental contaminants, drinking water purity, and follow-up investigations of disease outbreak. In addition, the Department serves as primary liaison with local and county health departments to ensure the quality of public health services throughout New York State.

The Wadsworth Center for Laboratories and Research assists the Department in accomplishing its public health mission. Screening programs conducted by the Center annually report nearly three million test results to providers. These programs encompass such public health concerns as HIV, tuberculosis, and genetic disorders in newborns. Ongoing research, largely funded by external grants, is carried out for public health problems such as AIDS, Lyme disease, cancer and the toxic effects of chemical substances and radiation. In addition, the Wadsworth Center regulates over 800 environmental laboratories and over 1,800 clinical laboratories and blood banks to ensure testing quality, and the public's health and safety.

HEALTH

RESPONSE TO THE AIDS EPIDEMIC

The Department develops and funds HIV prevention and health care programs, educates the public and health care providers, formulates policy and directs regional and statewide HIV/AIDS planning. New York remains a leader in combating this complex epidemic by responding to changes in incidence with even greater attention to population-based programming, long term care and policies designed to reduce discrimination and guarantee basic medical care and treatment for the uninsured. New York State will spend \$2 billion to combat HIV/AIDS next year.

HEALTH SYSTEMS MANAGEMENT

The Department assures that quality health care is available to all New York residents by overseeing the services provided by hospitals, nursing homes, diagnostic and treatment centers and home care providers. The Department strives to ensure that limited health care dollars are prudently spent through its reimbursement rate methodologies, rate setting, and review and monitoring of health facility plans for construction and expansion. Federal reimbursement for surveillance and certification, and fees for overseeing facilities to assure that bonded debt is repaid, help to offset program costs.

ALL FUNDS APPROPRIATIONS

Category	Available 1999-00	Appropriations Recommended 2000-01	Change	Reappropriations Recommended 2000-01
State Operations	\$3,297,895,100	\$3,797,889,800	+\$499,994,700	\$3,755,948,900
Aid To Localities	23,461,753,872	25,088,546,200	+1,626,792,328	19,147,355,650
Capital Projects	98,877,000	120,077,000	+21,200,000	205,839,000
Total	<u>\$26,858,525,972</u>	<u>\$29,006,513,000</u>	<u>+\$2,147,987,028</u>	<u>\$23,109,143,550</u>

**ALL FUND TYPES
LEVELS OF EMPLOYMENT BY PROGRAM
ANNUAL SALARIED POSITIONS**

2000-01 Recommended Average Fill Level

<u>Program</u>	<u>Available 1999-00</u>	<u>Personal Service (Regular)</u>	<u>Maintenance Undistributed</u>	<u>Total Recommended 2000-01</u>	<u>Change</u>
Administration and Executive Direction					
General Fund	188	148	....	148	-40
Special Revenue Funds - Federal	159	158	....	158	-1
Special Revenue Funds - Other	224	251	....	251	+27
AIDS Institute					
General Fund	186	198	....	198	+12
Special Revenue Funds - Other	20	20	....	20	....
Child Health Insurance					
Special Revenue Funds - Other	46	46	....	46	....
Community Health					
General Fund	76	90	....	90	+14
Special Revenue Funds - Federal	639	605	....	605	-34
Special Revenue Funds - Other	1	1	....	1	....
Office of Continuing Care					
General Fund	369	369	....	369	....
Special Revenue Funds - Other	2	2	....	2	....
Elderly Pharmaceutical Insurance Coverage					
General Fund	20	20	....	20	....
Environmental Health					
General Fund	120	102	....	102	-18
Special Revenue Funds - Federal	134	133	....	133	-1
Special Revenue Funds - Other	90	123	....	123	+33
Health Care Financing					
General Fund	87	87	....	87	....
Special Revenue Funds - Other	59	58	....	58	-1
Health Care Standards and Surveillance					
General Fund	276	276	....	276	....
Special Revenue Funds - Other	235	240	....	240	+5
Institution Management					
Special Revenue Funds - Other	1,438	1,411	....	1,411	-27
Laboratories and Research					
General Fund	407	405	....	405	-2
Special Revenue Funds - Federal	86	77	....	77	-9
Special Revenue Funds - Other	164	164	....	164	....
Managed Care					
General Fund	152	152	....	152	....
Special Revenue Funds - Other	3	3	....	3	....
Medicaid Audit and Fraud Prevention					
General Fund	228	228	....	228	....
Special Revenue Funds - Federal	244	244	....	244	....
Special Revenue Funds - Other	27	27	....	27	....
Office of Medicaid Management					
Special Revenue Funds - Other	5	5	....	5	....
Medical Assistance					
General Fund	422	422	....	422	....
Subtotal, Direct Funded Programs	6,107	6,065	....	6,065	-42
Suballocations:					
Special Revenue Funds - Federal	22			22	....
Special Revenue Funds - Other	106			106	....
Enterprise Funds	16			16	....
Total	6,251			6,209	-42

**STATE OPERATIONS
ALL FUNDS FINANCIAL REQUIREMENTS BY FUND TYPE
APPROPRIATIONS**

<u>Fund Type</u>	<u>Available 1999-00</u>	<u>Recommended 2000-01</u>	<u>Change</u>
General Fund	\$143,116,000	\$188,825,800	+\$45,709,800
Special Revenue Funds - Federal	2,729,447,600	3,265,405,600	+535,958,000
Special Revenue Funds - Other	422,596,500	340,923,400	-81,673,100
Enterprise Funds	10,000	10,000	.....
Fiduciary Funds	2,725,000	2,725,000	.....
Total	\$3,297,895,100	<u>\$3,797,889,800</u>	<u>+\$499,994,700</u>
Adjustments:			
Prior Year Deficiency			
Health, Department of			
Special Revenue Funds - Other	+2,000,000		
Appropriated 1999-00	<u>\$3,299,895,100</u>		

**STATE OPERATIONS
ALL FUNDS FINANCIAL REQUIREMENTS BY PROGRAM
APPROPRIATIONS**

<u>Program</u>	<u>Available 1999-00</u>	<u>Recommended 2000-01</u>	<u>Change</u>
Administration and Executive Direction			
General Fund	\$15,809,900	\$18,015,500	+\$2,205,600
Special Revenue Funds - Federal	15,666,400	14,464,000	-1,202,400
Special Revenue Funds - Other	21,929,700	23,339,600	+1,409,900
AIDS Institute			
General Fund	15,509,900	15,873,200	+363,300
Special Revenue Funds - Federal	200,000	.....	-200,000
Special Revenue Funds - Other	1,967,600	1,972,300	+4,700
Child Health Insurance			
Special Revenue Funds - Federal	13,000,000	13,400,000	+400,000
Special Revenue Funds - Other	7,000,000	11,000,000	+4,000,000
Community Health			
General Fund	7,475,900	9,045,900	+1,570,000
Special Revenue Funds - Federal	87,366,100	94,466,900	+7,100,800
Special Revenue Funds - Other	3,593,800	5,593,900	+2,000,100
Office of Continuing Care			
General Fund	20,041,300	20,096,000	+54,700
Special Revenue Funds - Federal	12,778,000	12,778,000	.....
Special Revenue Funds - Other	3,567,100	3,618,000	+50,900
Fiduciary Funds	400,000	400,000	.....
Elderly Pharmaceutical Insurance Coverage			
General Fund	5,864,500	6,719,000	+854,500
Environmental Health			
General Fund	8,335,600	7,736,200	-599,400
Special Revenue Funds - Federal	12,755,500	12,909,300	+153,800
Special Revenue Funds - Other	13,247,600	15,363,700	+2,116,100
Health Care Financing			
General Fund	5,681,600	5,476,700	-204,900
Special Revenue Funds - Other	5,094,700	5,440,000	+345,300
Health Care Standards and Surveillance			
General Fund	22,668,100	22,460,300	-207,800
Special Revenue Funds - Federal	622,000	.....	-622,000
Special Revenue Funds - Other	37,231,300	40,407,300	+3,176,000
Institution Management			
General Fund	100,000	.....	-100,000
Special Revenue Funds - Other	195,460,800	106,055,200	-89,405,600
Enterprise Funds	10,000	10,000	.....
Fiduciary Funds	325,000	325,000	.....
Laboratories and Research			
General Fund	27,420,100	33,200,100	+5,780,000
Special Revenue Funds - Federal	7,599,600	7,962,200	+362,600
Special Revenue Funds - Other	27,796,000	27,795,400	-600
Fiduciary Funds	2,000,000	2,000,000	.....
Maintenance Undistributed			
General Fund	-91,648,900	-78,338,000	+13,310,900
Special Revenue Funds - Other	89,148,900	78,338,000	-10,810,900
Managed Care			
General Fund	13,058,000	13,241,000	+183,000
Special Revenue Funds - Other	709,000	.....	-709,000
Medicaid Audit and Fraud Prevention			
General Fund	14,809,000	17,073,300	+2,264,300
Special Revenue Funds - Federal	27,176,000	34,563,500	+7,387,500
Special Revenue Funds - Other	14,500,000	14,500,000	.....
Office of Medicaid Management			
Special Revenue Funds - Federal	2,528,131,000	3,007,350,700	+479,219,700
Special Revenue Funds - Other	1,350,000	7,500,000	+6,150,000
Medical Assistance			
General Fund	41,111,000	44,550,600	+3,439,600
Medicaid Management Information System			
General Fund	36,880,000	53,676,000	+16,796,000
Special Revenue Funds - Federal	24,153,000	67,511,000	+43,358,000
Total	\$3,297,895,100	\$3,797,889,800	+\$499,994,700

HEALTH

STATE OPERATIONS — GENERAL AND OFFSET FUNDS SUMMARY OF PERSONAL SERVICE APPROPRIATIONS AND CHANGES 2000-01 RECOMMENDED

Program	Total Personal Service		Personal Service Regular (Annual Salaried)		Temporary Service (Nonannual Salaried)	
	Amount	Change	Amount	Change	Amount	Change
Administration and Executive						
Direction	\$7,650,300	-\$1,994,400	\$7,422,300	-\$1,994,400	\$125,000	.....
AIDS Institute	9,661,400	+845,600	9,646,400	+845,600	.....	.....
Community Health	4,043,000	+543,000	3,964,200	+543,000	60,000	.....
Office of Continuing Care	18,796,000	+53,300	18,796,000	+53,300	.....	.....
Elderly Pharmaceutical Insurance						
Coverage	1,017,000	-22,300	1,016,000	-22,300	.....	.....
Environmental Health	5,800,000	-599,400	5,603,200	-599,400	186,300	.....
Health Care Financing	4,608,400	-204,900	4,576,400	-204,900	.....	.....
Health Care Standards and						
Surveillance	14,313,600	-207,800	14,143,600	-278,700	20,000	.....
Laboratories and Research	19,550,000	+750,000	19,228,500	+750,000	64,200	.....
Managed Care	8,565,000	+183,000	8,565,000	+183,000	.....	.....
Medicaid Audit and Fraud Prevention	12,389,700	+116,700	12,292,700	+100,500	48,500	.....
Medical Assistance	20,859,200	-308,800	20,639,200	-308,800	70,000	.....
Total	<u>\$127,253,600</u>	<u>-\$846,000</u>	<u>\$125,893,500</u>	<u>-\$933,100</u>	<u>\$574,000</u>	<u>.....</u>

Program	Holiday/Overtime Pay (Annual Salaried)	
	Amount	Change
Administration and Executive		
Direction	\$103,000	.....
AIDS Institute	15,000	.....
Community Health	18,800	.....
Elderly Pharmaceutical Insurance		
Coverage	1,000	.....
Environmental Health	10,500	.....
Health Care Financing	32,000	.....
Health Care Standards and		
Surveillance	150,000	+\$70,900
Laboratories and Research	257,300	.....
Medicaid Audit and Fraud Prevention	48,500	+16,200
Medical Assistance	150,000	.....
Total	<u>\$786,100</u>	<u>+\$87,100</u>

**STATE OPERATIONS — GENERAL AND OFFSET FUNDS
SUMMARY OF NONPERSONAL SERVICE AND MAINTENANCE UNDISTRIBUTED
APPROPRIATIONS AND CHANGES
2000-01 RECOMMENDED**

Program	Total		Supplies and Materials	
	Amount	Change	Amount	Change
Administration and Executive				
Direction	\$10,365,200	+\$4,200,000	\$740,000	.....
AIDS Institute	6,211,800	-482,300	1,500,900	+\$26,900
Community Health	5,002,900	+1,027,000	1,119,800	+800,000
Office of Continuing Care	1,300,000	+1,400	108,200	+1,400
Elderly Pharmaceutical				
Insurance Coverage	5,702,000	+876,800	18,600	.....
Environmental Health	1,936,200	.....	133,600	.....
Health Care Financing	868,300	.....	12,200	.....
Health Care Standards and				
Surveillance	8,146,700	.....	41,400	.....
Institution Management .....	.....	-100,000	.....	.....
Laboratories and Research	13,650,100	+5,030,000	3,147,700	+30,000
Managed Care	4,676,000	.....	122,100	.....
Medicaid Audit and Fraud				
Prevention	4,683,600	+2,147,600	85,300	.....
Medical Assistance	23,691,400	+3,748,400	91,320	.....
Medicaid Management Information				
System	53,676,000	+16,796,000	.....	.....
Total	\$139,910,200	+\$33,244,900	\$7,121,120	+\$858,300

Program	Travel		Contractual Services	
	Amount	Change	Amount	Change
Administration and Executive				
Direction	\$262,200	.....	\$5,112,000	.....
AIDS Institute	310,500	+\$53,900	3,709,500	.....
Community Health	166,500	+27,000	3,678,200	+\$200,000
Office of Continuing Care	766,900	.....	377,400	.....
Elderly Pharmaceutical				
Insurance Coverage	9,700	.....	5,599,800	+876,800
Environmental Health	374,400	.....	1,322,600	.....
Health Care Financing	38,400	.....	804,000	.....
Health Care Standards and				
Surveillance	380,400	.....	6,765,800	.....
Institution Management .....	.....	.....	.....	-100,000
Laboratories and Research	76,000	.....	5,071,900	.....
Managed Care	292,000	.....	3,861,400	.....
Medicaid Audit and Fraud				
Prevention	180,000	.....	2,642,800	+1,547,600
Medical Assistance	320,800	.....	3,759,480	+162,400
Medicaid Management Information				
System	53,676,000	+16,796,000
Total	\$3,177,800	+\$80,900	\$96,380,880	+\$19,482,800

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Program	Equipment		General State Charges	
	Amount	Change	Amount	Change
Administration and Executive				
Direction	\$51,000	....	....	....
AIDS Institute	240,900	+\$26,900	....	....
Community Health	38,400	....	....	....
Office of Continuing Care	47,500	....	....	....
Elderly Pharmaceutical				
Insurance Coverage	3,500	....	....	....
Environmental Health	105,600	....	....	....
Health Care Financing	13,700	....	....	....
Health Care Standards and				
Surveillance	147,400	....	\$811,700	....
Laboratories and Research	354,500	....	....	....
Managed Care	400,500	....	....	....
Medicaid Audit and Fraud				
Prevention	626,500	+600,000	....	....
Medical Assistance	68,800	....	....	....
Total	<u>\$2,098,300</u>	<u>+\$626,900</u>	<u>\$811,700</u>	<u>....</u>

Program	Maintenance Undistributed	
	Amount	Change
Administration and Executive		
Direction	\$4,200,000	+\$4,200,000
AIDS Institute	450,000	-590,000
Elderly Pharmaceutical		
Insurance Coverage	70,400	....
Laboratories and Research	5,000,000	+5,000,000
Medicaid Audit and Fraud		
Prevention	1,149,000	....
Medical Assistance	19,451,000	+3,586,000
Total	<u>\$30,320,400</u>	<u>+\$12,196,000</u>

**STATE OPERATIONS — OTHER THAN GENERAL AND OFFSET FUNDS
SUMMARY OF APPROPRIATIONS AND CHANGES
2000-01 RECOMMENDED**

<u>Program</u>	<u>Total</u>		<u>Personal Service</u>	
	<u>Amount</u>	<u>Change</u>	<u>Amount</u>	<u>Change</u>
Administration and Executive				
Direction	\$37,803,600	+\$207,500	\$13,078,900	+\$1,159,400
AIDS Institute	1,972,300	-195,300	764,300	.....
Child Health Insurance	24,400,000	+4,400,000	2,200,000	+26,000
Community Health	100,060,800	+9,100,900	25,000	.....
Office of Continuing Care	16,796,000	+50,900	124,300	+2,500
Environmental Health	28,273,000	+2,269,900	4,131,300	+931,100
Health Care Financing	5,440,000	+345,300	2,968,500	-106,600
Health Care Standards and				
Surveillance	40,407,300	+2,554,000	11,842,900	+140,600
Institution Management	103,890,200	-91,905,600	.....	.....
Laboratories and Research	37,757,600	+362,000	8,441,600	-31,800
Managed Care .....	.....	-709,000	.....	-120,000
Medicaid Audit and Fraud				
Prevention	49,063,500	+7,387,500	.....	.....
Office of Medicaid Management ..	3,014,850,700	+485,369,700	.....	.....
Medicaid Management Information				
System	67,511,000	+43,358,000	.....	.....
Total	<u>\$3,528,226,000</u>	<u>+\$462,595,800</u>	<u>\$43,576,800</u>	<u>+\$2,001,200</u>

<u>Program</u>	<u>Nonpersonal Service</u>		<u>Maintenance Undistributed</u>	
	<u>Amount</u>	<u>Change</u>	<u>Amount</u>	<u>Change</u>
Administration and Executive				
Direction	\$10,260,700	+\$250,500	\$14,464,000	-\$1,202,400
AIDS Institute	1,208,000	+4,700	.....	-200,000
Child Health Insurance	8,800,000	+3,974,000	13,400,000	+400,000
Community Health	115,500	+100	99,920,300	+9,100,800
Office of Continuing Care	3,493,700	+48,400	13,178,000	.....
Environmental Health	9,052,400	+1,030,000	15,089,300	+308,800
Health Care Financing	1,971,500	-48,100	500,000	+500,000
Health Care Standards and				
Surveillance	11,005,200	+788,700	17,559,200	+1,624,700
Institution Management .....	.....	.....	103,890,200	-91,905,600
Laboratories and Research	10,853,800	+31,200	18,462,200	+362,600
Managed Care .....	.....	-89,000	.....	-500,000
Medicaid Audit and Fraud				
Prevention	10,000,000	.....	39,063,500	+7,387,500
Office of Medicaid Management ..	.....	.....	3,014,850,700	+485,369,700
Medicaid Management Information				
System .....	.....	.....	67,511,000	+43,358,000
Total	<u>\$66,760,800</u>	<u>+\$5,990,500</u>	<u>\$3,417,888,400</u>	<u>+\$454,604,100</u>

**AID TO LOCALITIES
ALL FUNDS FINANCIAL REQUIREMENTS BY FUND TYPE
APPROPRIATIONS**

<u>Fund Type</u>	<u>Available</u> <u>1999-00</u>	<u>Recommended</u> <u>2000-01</u>	<u>Change</u>
General Fund	\$6,229,488,872	\$6,207,671,600	-\$21,817,272
Special Revenue Funds - Federal	15,631,996,500	16,559,293,500	+927,297,000
Special Revenue Funds - Other	1,100,268,500	1,671,581,100	+571,312,600
Fiduciary Funds	500,000,000	650,000,000	+150,000,000
Total	<u>\$23,461,753,872</u>	<u>\$25,088,546,200</u>	<u>+\$1,626,792,328</u>
Adjustments:			
Prior Year Deficiency			
Health, Department of			
General Fund		+76,600,000	
Appropriated 1999-00	<u>\$23,538,353,872</u>		

HEALTH

AID TO LOCALITIES ALL FUNDS FINANCIAL REQUIREMENTS BY PROGRAM APPROPRIATIONS

<u>Program</u>	<u>Available 1999-00</u>	<u>Recommended 2000-01</u>	<u>Change</u>
Administration and Executive Direction			
General Fund	\$869,300	\$869,300	.....
AIDS Institute			
General Fund	77,317,200	53,655,700	-\$23,661,500
Special Revenue Funds - Other	10,933,500	34,595,000	+23,661,500
Child Health Insurance			
Special Revenue Funds - Federal	243,000,000	291,600,000	+48,600,000
Special Revenue Funds - Other	200,000,000	240,000,000	+40,000,000
Community Health			
General Fund	379,116,100	373,186,500	-5,929,600
Special Revenue Funds - Federal	561,603,300	584,097,900	+22,494,600
Special Revenue Funds - Other	18,647,000	36,578,100	+17,931,100
Office of Continuing Care			
General Fund	6,269,000	7,342,200	+1,073,200
Elderly Pharmaceutical Insurance Coverage			
General Fund	117,600,000	.....	-117,600,000
Special Revenue Funds - Other	37,100,000	195,400,000	+158,300,000
Environmental Health			
Special Revenue Funds - Federal	2,487,400	2,810,800	+323,400
Special Revenue Funds - Other	200,000	4,720,000	+4,520,000
Health Care Standards and Surveillance			
General Fund	9,184,900	9,184,900	.....
Laboratories and Research			
General Fund	1,071,000	1,071,000	.....
Special Revenue Funds - Federal	2,059,800	2,134,800	+75,000
Maintenance Undistributed			
General Fund	-7,288,000	-7,288,000	.....
Special Revenue Funds - Other	7,288,000	7,288,000	.....
Medical Assistance			
General Fund	5,544,100,000	5,681,900,000	+137,800,000
Special Revenue Funds - Federal	14,500,000,000	15,300,000,000	+800,000,000
Special Revenue Funds - Other	826,100,000	1,153,000,000	+326,900,000
Fiduciary Funds	500,000,000	650,000,000	+150,000,000
Medical Assistance Administration			
General Fund	79,650,000	87,750,000	+8,100,000
Special Revenue Funds - Federal	322,846,000	378,650,000	+55,804,000
Community Projects			
General Fund	21,599,372	.....	-21,599,372
Total	<u>\$23,461,753,872</u>	<u>\$25,088,546,200</u>	<u>+\$1,626,792,328</u>

**CAPITAL PROJECTS
ALL FUNDS FINANCIAL REQUIREMENTS BY PROGRAM
APPROPRIATIONS**

<u>Comprehensive Construction Program</u>	<u>Available 1999-00</u>	<u>Recommended 2000-01</u>	<u>Change</u>	<u>Reappropriations 2000-01</u>
Design and Construction Supervision				
Capital Projects Fund	.....	.....	.....	\$2,340,000
Rehabilitation And Improvements				
Capital Projects Fund	.....	.....	.....	4,579,000
St. Albans Rehabilitation & Improvement	\$200,000	.....	-\$200,000	200,000
Oxford Rehabilitation & Improvement	1,000,000	.....	-1,000,000	1,000,000
Helen Hayes Rehabilitation & Improvement	9,700,000	.....	-9,700,000	9,700,000
Batavia Rehabilitation & Improvement	500,000	.....	-500,000	500,000
Laboratories and Research				
Capital Projects Fund	3,700,000	\$4,000,000	+300,000	6,385,000
Maintenance and Improvements of Existing Institutions				
Capital Projects Fund	.....	7,600,000	+7,600,000	8,526,000
New Institution Construction				
Capital Projects Fund - Advances	.....	.....	.....	26,500,000
Department of Health Facilities Capital Improvemnt Fund	.....	.....	.....	19,265,000
Water Resources				
Federal Capital Projects Fund	33,777,000	48,477,000	+14,700,000	126,844,000
Safe Drinking Water - Clean Water/Clean Air 96				
Capital Projects Fund - 1996 CWA (Bondable)	50,000,000	60,000,000	+10,000,000	.....
Total	<u>\$98,877,000</u>	<u>\$120,077,000</u>	<u>+\$21,200,000</u>	<u>\$205,839,000</u>

