

**M00A01**  
**Administration**  
Department of Health and Mental Hygiene

***Operating Budget Data***

(\$ in Thousands)

	<u>FY 14</u> <u>Actual</u>	<u>FY 15</u> <u>Working</u>	<u>FY 16</u> <u>Allowance</u>	<u>FY 15-16</u> <u>Change</u>	<u>% Change</u> <u>Prior Year</u>
General Fund	\$24,546	\$25,999	\$28,577	\$2,577	9.9%
Deficiencies and Reductions	0	0	-978	-978	
<b>Adjusted General Fund</b>	<b>\$24,546</b>	<b>\$25,999</b>	<b>\$27,599</b>	<b>\$1,600</b>	<b>6.2%</b>
Special Fund	0	575	684	109	19.0%
<b>Adjusted Special Fund</b>	<b>\$0</b>	<b>\$575</b>	<b>\$684</b>	<b>\$109</b>	<b>19.0%</b>
Federal Fund	15,537	16,103	16,162	59	0.4%
Deficiencies and Reductions	0	0	-82	-82	
<b>Adjusted Federal Fund</b>	<b>\$15,537</b>	<b>\$16,103</b>	<b>\$16,080</b>	<b>-\$23</b>	<b>-0.1%</b>
Reimbursable Fund	8,483	8,421	7,966	-455	-5.4%
<b>Adjusted Reimbursable Fund</b>	<b>\$8,483</b>	<b>\$8,421</b>	<b>\$7,966</b>	<b>-\$455</b>	<b>-5.4%</b>
<b>Adjusted Grand Total</b>	<b>\$48,565</b>	<b>\$51,098</b>	<b>\$52,329</b>	<b>\$1,230</b>	<b>2.4%</b>

Note: The fiscal 2015 working appropriation reflects deficiencies and the Board of Public Works reductions to the extent that they can be identified by program. The fiscal 2016 allowance reflects back of the bill and contingent reductions to the extent that they can be identified by program.

- The fiscal 2016 allowance for the Department of Health and Mental Hygiene (DHMH) Administration increases by \$1.2 million (2.4%) net of cost containment and across-the-board reductions, primarily due to increases in personnel expenses.

Note: Numbers may not sum to total due to rounding.

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***Personnel Data***


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	<b><u>FY 14 Actual</u></b>	<b><u>FY 15 Working</u></b>	<b><u>FY 16 Allowance</u></b>	<b><u>FY 15-16 Change</u></b>
Regular Positions	371.00	368.60	368.60	0.00
Contractual FTEs	<u>6.48</u>	<u>10.63</u>	<u>8.64</u>	<u>-1.99</u>
<b>Total Personnel</b>	<b>377.48</b>	<b>379.23</b>	<b>377.24</b>	<b>-1.99</b>

***Vacancy Data: Regular Positions***

Turnover and Necessary Vacancies, Excluding New Positions	23.30	6.32%
Positions and Percentage Vacant as of 1/1/15	25.40	6.89%

- There are no changes in the regular personnel complement for DHMH Administration.

## ***Analysis in Brief***

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### **Major Trends**

***Repeat Audit Findings Increase:*** After several years of improvement, the percentage of repeat audit findings across the department increased from 11% to 30% between fiscal 2013 and 2014.

***Facility Infrastructure:*** The condition of facility infrastructure systems in good/excellent condition improved in fiscal 2014 from 89% to 91%. The percentage of residential and program buildings meeting appropriate standards, codes, and client needs improved slightly in fiscal 2014 but remains at only 40%. Marked improvement in this area requires major capital investment. The 2015 *Capital Improvement Program* (CIP) offers no funding in fiscal 2016 and has deferred funding for some projects to later in the CIP.

***Workforce:*** The department's capacity to attract and retain workers in 20 key employment categories improved in fiscal 2014; however, the vacancy rate among skilled direct care workers in these categories remained at 18%.

### **Recommended Actions**

1. Adopt committee narrative requesting a report on improving residential facilities up to standards.

### **Updates**

***Report on Federal Repeat Audit Findings:*** A report was submitted in response to committee narrative providing detail on all of the federal audits of DHMH for the period fiscal 2010 through 2014. However, as a result of the way in which the federal government conducts their auditing process, DHMH could not provide any information on updates by the federal government or corrective action plans to repeat audit findings.

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**Administration**  
**Department of Health and Mental Hygiene**

## ***Operating Budget Analysis***

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### **Program Description**

The Department of Health and Mental Hygiene (DHMH) Administration budget analysis includes the following offices within the department:

- Office of the Secretary (Executive Direction and Operations); and
- Deputy Secretary for Behavioral Health.

The **Office of the Secretary** establishes policies regarding health services and supervises the administration of the health laws of the State and its subdivisions. The Office of the Secretary also includes the general support functions for the whole department, providing administrative, financial, information technology (IT), and general services (such as central warehouse management, inventory control, fleet management, space management, and management of engineering/construction projects).

The **Deputy Secretary for Behavioral Health** oversees and coordinates the work of the recently created Behavioral Health Administration (the merger of the Alcohol and Drug Abuse and Mental Hygiene Administrations).

### **Performance Analysis: Managing for Results**

#### **1. Repeat Audit Findings Increase**

The DHMH Administration Managing for Results (MFR) measures are administrative in nature. Selected measures are included in **Exhibit 1**. Reported MFR measures in this agency typically vary little from year to year. However, one measure that has seen a marked increase is the number of repeat audit findings in audits conducted by the Office of Legislative Audits (OLA). After a steady decline down to 11% in fiscal 2013, fiscal 2014 jumped up to 30%. This is mostly related to the audits for the Health Professional Boards and Commissions with 3 repeat findings out of a total of 3, and the Developmental Disabilities Administration with 6 repeat findings out of a total of 13. Even more troubling is the prevalence of repeat findings in the most recent audit of DHMH Administration, which contained 3 repeat findings out of a total of 15.

**Exhibit 1**  
**Selected Program Measurement Data**  
**DHMH Administration**  
**Fiscal 2010-2014**

	<u>Actual 2010</u>	<u>Actual 2011</u>	<u>Actual 2012</u>	<u>Actual 2013</u>	<u>Actual 2014</u>
Repeat Office of Legislative Audits' audit comments (%)	28	12	18	11	30
Condition of facility infrastructure systems (% in good/excellent condition)	88	89	89	89	91
Residential and program buildings meeting licensing standards, current building codes, and patient/client needs (%)	26	34	34	39	40
Retention rate within 20 key classifications (%)	88	88	88	86	88
State retention rate grades 5-26 (%)	91	89	91	91	90

DHMH: Department of Health and Mental Hygiene

Source: Department of Health and Mental Hygiene

## 2. Facility Infrastructure

In terms of facilities, as further shown in Exhibit 1, there is an improvement in the condition of facility infrastructure systems and the number of residential and program buildings meeting licensing requirements, current building standards, and patient/client needs. As noted in prior analyses, new standards for patient safety goals for psychiatric hospitals established in 2008 by the Joint Commission resulted in a significant downgrading of the percentage of buildings in compliance with requirements, standards, and needs. Capital and operating funding was provided in fiscal 2010 to make the necessary improvements. These improvements are reflected in an increase in this particular measure.

However, as also noted in prior analyses, the department's **goal** for the percentage of residential and program buildings meeting licensing requirements, current building standards, and patient/client needs is still remarkably low – 65% by the end of fiscal 2016 – and will remain so until significant capital projects are completed. These projects include replacing Spring Grove Hospital Center, the renovation of the north wing at Clifton T. Perkins Hospital Center, the construction of the new Secure Evaluation and Therapeutic Treatment (SETT) Center, as well as significant improvements to buildings at the Holly Center, Potomac Center, and Western Maryland Hospital Center. The fiscal 2016 *Capital Improvement Program* (CIP) shows construction funding for the SETT deferred again from fiscal 2016 to 2017 while maintaining the scope of the project as a renovation of a building at Springfield Hospital Center rather than the construction of a new facility at Jessup. The CIP also includes the Clifton T. Perkins north wing renovation, but no funding is planned until fiscal 2017. There is no further funding for other projects in the CIP, which begs the question on how DHMH will

improve these facilities and bring them up to standards. **The Department of Legislative Services recommends requesting a report on a five-year plan to bring these facilities up to current standards.**

### **3. Workforce**

One measure of the department's ability to attract and retain a skilled workforce is the employment rate within 20 key classifications (see **Exhibit 2**). These 20 classifications are taken from over 750 classification levels used by DHMH and are considered by the department to be a representative sample of those classifications key to fulfilling the mission of the department. The employment rate is calculated by dividing the number of filled positions versus total positions on a monthly basis and then averaged for the year. This particular measure had essentially been flat since fiscal 2010 at 88% but fell to 86% in fiscal 2013. In fiscal 2014, it rose again to 88%.

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#### **Exhibit 2**

#### **DHMH MFR Retention Goal: 20 Key Classification Levels**

Sanitarian IV/Environmental Sanitarian II	Direct Care Assistant II
Coordinator Special Programs Health Services/Developmental Disabilities	Community Health Nurse II
Medical Care Program Specialist II	Health Facility Surveyor Nurse I
Agency Procurement Specialist II	Registered Nurse
Office Secretary III	Computer Network Specialist II
Public Health Lab Scientist General and Lead	Fiscal Accounts Clerk II
Social Worker II, Health Services	Accountant II
Program Administrator II, Health Services	Physician Clinical Specialist
Alcohol and Drug Counselors	Physician Program Manager
Epidemiologist III	Health Policy Analyst, Advanced

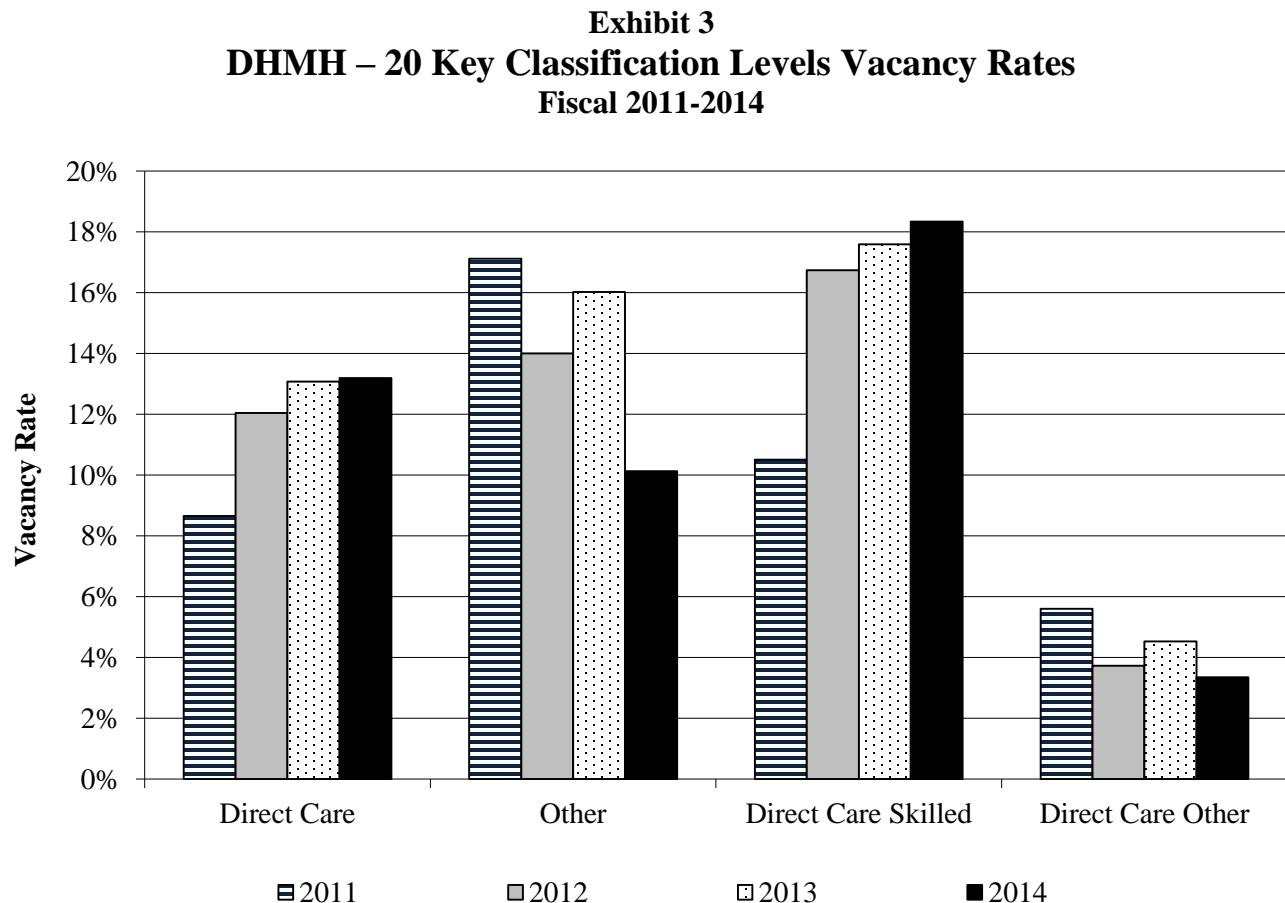
DHMH: Department of Health and Mental Hygiene  
MFR: Managing for Results

Source: Department of Health and Mental Hygiene

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**Exhibit 3** presents more detailed information from the same data and shows:

- Since fiscal 2011, the vacancy rate among the direct care categories has grown, from 9% to 13% between fiscal 2011 and 2013, remaining at 13% in fiscal 2014. This is despite a drop in the total number of positions in this category.



DHMH: Department of Health and Mental Hygiene

Source: Department of Health and Mental Hygiene; Department of Legislative Services

- Vacancies in nondirect care categories had previously been higher; however, between fiscal 2013 and 2014, they fell from 16% to 10%. However, the number of positions declined in this category as well.



- There continues to be a striking difference in terms of vacancy rates within the direct care category between skilled direct care workers (for example, nurses and physicians) and other direct care workers (in this instance, direct care assistants). The vacancy rate among skilled direct care workers is almost 18% in fiscal 2014, compared to 3% for other direct care workers. The disparity grew sharply between fiscal 2011 and 2012. There does not appear to be any explanation for this difference other than the simple difficulty that the State has in hiring skilled direct care positions.

## **Fiscal 2015 Actions**

### **Cost Containment**

On January 7, 2015, the Board of Public Works (BPW) withdrew \$205.3 million in appropriations as fiscal 2015 cost containment. This included a 0.6% across-the-board general fund reduction to DHMH totaling \$25,448,100. If allocated proportionally, it would equal \$171,375 in this program.

BPW also withdrew \$234,382 due to the implementation of the new Statewide Personnel IT System. DHMH's share of this reduction was \$48,786.

## **Proposed Budget**

As shown in **Exhibit 4**, the budget for DHMH Administration grows by \$1.2 million after contingent and back of the bill reductions. Almost all of the spending growth is due to personnel costs.

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**Exhibit 4**  
**Proposed Budget**  
**DHMH – Administration**  
**(\$ in Thousands)**

<b>How Much It Grows:</b>	<b><u>General Fund</u></b>	<b><u>Special Fund</u></b>	<b><u>Federal Fund</u></b>	<b><u>Reimb. Fund</u></b>	<b><u>Total</u></b>
Fiscal 2014 Actual	\$24,546	\$0	\$15,537	\$8,483	\$48,565
Fiscal 2015 Working Appropriation	25,999	575	16,103	8,421	51,098
Fiscal 2016 Allowance	<u>27,599</u>	<u>684</u>	<u>16,080</u>	<u>7,966</u>	<u>52,329</u>
Fiscal 2015-2016 Amt. Change	\$1,600	\$109	-\$23	-\$455	\$1,230
Fiscal 2015-2016 Percent Change	6.2%	19.0%	-0.1%	-5.4%	2.4%

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### **Where It Goes:**

#### **Personnel Expenses**

Increments and other compensation (prior to cost containment) .....	\$802
Employee and retiree health insurance.....	728
Retirement contributions .....	359
Miscellaneous salary adjustments .....	125
Workers' compensation premium assessment.....	122
Turnover adjustments .....	98
Other fringe benefit adjustments .....	14
Section 20: 2% general salary reduction .....	-491
Section 21: elimination of employee increment/merit increases .....	-569

#### **Other Changes**

Capital lease payment.....	356
Department of Information Technology services allocation fee .....	285
Other.....	-15
Contractual employment .....	-22
State Retirement Agency fees .....	-38
Rent (non-DGS) .....	-40
State Treasurer's Office insurance payments .....	-47
Information technology projects .....	-124
Community Services Reimbursement Rate Commission.....	-135
Office of Administrative Hearings fee .....	-178

<b>Total</b>	<b>\$1,230</b>
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DGS: Department of General Services

Note: Numbers may not sum to total due to rounding. The fiscal 2015 working appropriation reflects deficiencies and the Board of Public Works reductions to the extent that they can be identified by program. The fiscal 2016 allowance reflects back of the bill and contingent reductions to the extent that they can be identified by program.

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### **Cost Containment**

In fiscal 2016, the Administration has implemented several across-the-board reductions. This includes the elimination of employee increments and a 2% pay reduction, effective July 1, 2015. This agency's share of these reductions is \$568,508 and \$491,464, respectively.

There is also a 2.0% across-the-board general reduction in the fiscal 2016 allowance, which includes a 0.6% across-the-board general fund reduction to DHMH totaling \$27,215,000. If allocated proportionally, it would equal \$183,274 in DHMH Administration.

## **Personnel**

Personnel expenditures, prior to cost containment, increase the fiscal 2016 allowance by \$2.2 million. The largest increase is for increments and other compensation, at \$801,526. Other large personnel increases include employee and retiree health insurance payments (\$728,369), retirement contributions (\$358,629), and miscellaneous salary adjustments (\$125,058).

## **Other Changes**

Most of the other major budget changes in fiscal 2016 are fees and other payments that are assigned costs to the department. The only large increase in assigned costs is for the services of the Department of Information Technology (DoIT) at \$285,000. Most of the assigned costs are actually decreasing between fiscal 2015 and 2016, with the largest decrease being \$178,000 for the Office of Administrative Hearings.

Other large changes include an increase of \$356,000 for a capital lease payment related to new storage area network equipment and disaster recovery data center financed through the Treasurer's Equipment Lease-Purchase program, which is partially offset by a decrease of \$135,000 due to the end of funding for the Community Services Reimbursement Rate Commission. Contractual employment costs decrease by \$22,000 due to the elimination of approximately 2 full-time equivalents.

## ***Recommended Actions***

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1. Adopt the following narrative:

**Residential Facility Standards:** The budget committees remain concerned about the fact that the percentage of residential and program buildings meeting licensing standards, current building codes, and patient/client needs has remained below 50% for several years. The committees request that the Department of Health and Mental Hygiene (DHMH) in conjunction with the Department of Budget and Management (DBM) submit a report by November 1, 2015, that provides for a plan on how the State will bring all of these buildings up to current standards in the next five years.

Information Request	Authors	Due Date
Five year plan on improving residential facility standards.	DHMH DBM	November 1, 2015

## *Updates*

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### **1. Report on Federal Repeat Audit Findings**

Due to concerns about DHMH’s performance on federal audits, the budget committees inserted narrative in the 2014 *Joint Chairmen’s Report* requesting a report detailing, for the period fiscal 2010 through 2014, a complete listing of audits on any program within the department conducted by the federal government, along with a listing of any repeat audit findings and any and all responses from the department to the audits. A report was submitted by DHMH on October 14, 2014.

In the report, DHMH included all audit documentation for the requested period, which included 11 separate federal audit reports, as well as DHMH’s responses to those audits. The majority of the audits dealt with issues in Medicaid claims and reporting. Further, while the narrative requested information concerning repeat findings, DHMH notes that the federal government does not conduct repeat audits in the same manner as OLA does in the State. Thus, DHMH could not provide updates on repeat findings by the federal government or corrective action plans to repeat findings.

## ***Current and Prior Year Budgets***

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### **Current and Prior Year Budgets DHMH – Administration (\$ in Thousands)**

	<b><u>General Fund</u></b>	<b><u>Special Fund</u></b>	<b><u>Federal Fund</u></b>	<b><u>Reimb. Fund</u></b>	<b><u>Total</u></b>
<b>Fiscal 2014</b>					
Legislative Appropriation	\$27,085	\$5	\$16,525	\$7,985	\$51,599
Deficiency Appropriation	-2,735	0	-57	0	-2,793
Budget Amendments	275	359	1	681	1,316
Reversions and Cancellations	-78	-364	-932	-183	-1,557
<b>Actual Expenditures</b>	<b>\$24,546</b>	<b>\$0</b>	<b>\$15,537</b>	<b>\$8,483</b>	<b>\$48,565</b>
<b>Fiscal 2015</b>					
Legislative Appropriation	\$25,965	\$575	\$16,081	\$8,407	\$51,027
Cost Containment	-49	0	0	0	-49
Budget Amendments	83	0	23	14	120
<b>Working Appropriation</b>	<b>\$25,999</b>	<b>\$575</b>	<b>\$16,103</b>	<b>\$8,421</b>	<b>\$51,098</b>

Note: Numbers may not sum to total due to rounding. The fiscal 2015 working appropriation does not include January 2015 Board of Public Works reductions and deficiencies.

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## **Fiscal 2014**

Actual spending in fiscal 2014 for DHMH Administration was \$3,033,815 below the legislative appropriation. This decrease was derived as follows.

Deficiency appropriations removed a total of \$2,792,531 in total funds, including \$2,735,463 in general funds and \$57,068 in federal funds. Of this amount, statewide reductions for payments related to health insurance and retirement contributions removed \$902,622 in general funds and \$57,068 in federal funds. A further \$2,232,841 general fund reduction was made due to savings from the Statewide Personnel IT System. These reductions were partially offset by a \$400,000 general fund increase in connection with the installation of a new storage area network.

Budget amendments added a total of \$1,315,757 in total funds, including \$274,511 in general funds, \$359,000 in special funds, \$996 in federal funds, and \$681,250 in reimbursable funds. Specifically, \$570,516 (\$528,033 in general funds and \$42,483 in federal funds) was added to fund the fiscal 2014 cost-of-living adjustment (COLA), increments, and annual salary review (ASR) increases approved during the 2013 session but not included in the DHMH Administration allowance. Other major increases include \$359,000 in special funds for the State Board of Physicians Licensing major IT project; \$236,362 in general funds for the transfer of 2 positions and associated funding regarding the implementation of Chapter 403 of 2013 related to the investigational use of medical marijuana for medical purposes; \$91,250 in reimbursable funds for indirect cost recovery from the Health Regulatory Commissions; and \$149,944 in federal funds and \$590,000 in reimbursable funds for the Developmental Disabilities Financial Restructuring IT project. These increases were offset by some major decreases, including \$96,982 in general funds and \$191,431 in federal funds related to the realignment of DoIT and State Retirement Agency administrative fees, as well as \$392,902 in general funds through a fiscal year closeout amendment transferring funds to other parts of the agency with general fund needs.

Reversions and cancellations totaled \$1,557,041 in total funds, including \$77,768 in general funds, \$364,000 in special funds, \$931,884 in federal funds, and \$183,389 in reimbursable funds. All special funds were cancelled due to delays in starting the Board of Physicians Licensing major IT project, while general, federal, and reimbursable fund reversions were mostly due to vacancy levels.

## **Fiscal 2015**

To date, \$71,111 has been added to the legislative appropriation for DHMH Administration. The fiscal 2015 COLA added \$213,266 in general funds and \$22,825 in federal funds. Other increases include \$13,632 in reimbursable funds to cover the cost of legal services for the Health Professional Boards and Commissions, as well as \$2,862 for the fiscal 2015 ASR. These increases were offset by numerous decreases, including \$132,688 in general funds to move a position from the Office of the Deputy Secretary for Behavioral Health to the Behavioral Health Administration, as well as \$48,786 in cost containment associated with the new Statewide Personnel IT System.

## ***Audit Findings***

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Audit Period for Last Audit:	October 15, 2009 – February 26, 2013
Issue Date:	February 2015
Number of Findings:	15
Number of Repeat Findings:	3
% of Repeat Findings:	20%
Rating: (if applicable)	n/a

- Finding 1:** Potential risks of the Medicaid Enterprise Restructuring Project and key aspects of the procurement process were not formally disclosed to BPW.
- Finding 2:** The Long Term Supports and Services Tracking System project was not adequately planned, initially subject to DoIT oversight, nor competitively procured.
- Finding 3:** Written policies were not established for conducting grant audits in a timely manner and in accordance with professional standards.
- Finding 4:** Grantee compliance with sub-vendor audit and oversight requirements were not verified during grant audits as required.
- Finding 5:** Records for open patient financial investigations were not properly maintained, and investigations were not always conducted and reviewed in a timely manner.
- Finding 6:** **Delinquent accounts receivable were not adequately pursued, and denied insurance and Medicare claims were not resolved in a timely manner.**
- Finding 7:** The Division of Cost Accounting and Reimbursements lacked appropriate procedures to ensure all cash receipts were deposited.
- Finding 8:** Supervisory oversight of federal fund reimbursement requests was not always effective.
- Finding 9:** Corporate purchasing card transactions were not thoroughly reviewed and supported, which allowed certain improper purchases to go undetected.
- Finding 10:** Intrusion detection prevention system coverage and controls for the DHMH network were insufficient.
- Finding 11:** **Network access to critical internal network devices was not properly restricted and monitoring of certain security events was not adequate.**



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**Finding 12:** Malware protection on DHMH workstations and servers needs improvement.

**Finding 13:** **Controls over the National Electronic Disease Surveillance System Database and the Hospital Management Information System Application were not sufficient.**

**Finding 14:** Proper controls were not established over the processing of settlement checks issued for capital grant projects.

**Finding 15:** Recordkeeping and physical inventory procedures were not in compliance with certain Department of General Services' requirements.

\*Bold denotes item repeated in full or part from preceding audit report.

## Major Information Technology Projects

### Department of Health and Mental Hygiene – Administration Maryland Board of Physicians Integrated Software System

<b>Project Status</b>	Planning.			<b>New/Ongoing Project:</b>		New.		
<b>Project Description:</b>	Development of new, more fully integrated medical licensure and investigation software system to replace the board’s existing systems.							
<b>Project Business Goals:</b>	Correction of deficiencies in the board’s existing software system and improvement of board’s efficiency.							
<b>Estimated Total Project Cost:</b>	n/a.			<b>Estimated Planning Project Cost:</b>			\$1,318,000	
<b>Project Start Date:</b>	November 2014.			<b>Projected Completion Date:</b>			Requirement analysis is to be completed April 2015. Project completion date to be determined.	
<b>New Schedule Status:</b>	The original start date of the project was September 2013. However, work delays have pushed this date back, and the hiring of a project manager is currently underway.							
<b>Schedule Status:</b>	The hiring of a project manager is currently underway.							
<b>Cost Status:</b>	Fiscal 2016 funding included in the Department of Health and Mental Hygiene administration budget.							
<b>Scope Status:</b>	n/a.							
<b>Project Management Oversight Status:</b>	Department of Information Technology project oversight is now in place.							
<b>Identifiable Risks:</b>	Moderate identifiable risks are the large scale of the project and the need to familiarize staff with a new system.							
<b>Additional Comments:</b>	Shortcomings of the board’s outdated software systems were noted in the 2011 Sunset Evaluation of the board, as well as in a report prepared by an independent consultant, pointing to the need for the replacement of the board’s existing systems.							
<b>Fiscal Year Funding (\$ in Thousands)</b>	<b>Prior Years</b>	<b>FY 2016</b>	<b>FY 2017</b>	<b>FY 2018</b>	<b>FY 2019</b>	<b>FY 2020</b>	<b>Balance to Complete</b>	<b>Total</b>
Personnel Services	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0
Professional and Outside Services	634.0	684.0	0.0	0.0	0.0	0.0	0.0	1,318.0
Other Expenditures	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
<b>Total Funding</b>	<b>\$634.0</b>	<b>\$684.0</b>	<b>\$0.0</b>	<b>\$0.0</b>	<b>\$0.0</b>	<b>\$0.0</b>	<b>\$0.0</b>	<b>\$1,3180.0</b>

**Object/Fund Difference Report  
DHMH – Administration**

<u>Object/Fund</u>	<u>FY 14 Actual</u>	<u>FY 15 Working Appropriation</u>	<u>FY 16 Allowance</u>	<u>FY 15 - FY 16 Amount Change</u>	<u>Percent Change</u>
<b>Positions</b>					
01 Regular	371.00	368.60	368.60	0.00	0%
02 Contractual	6.48	10.63	8.64	-1.99	-18.7%
<b>Total Positions</b>	<b>377.48</b>	<b>379.23</b>	<b>377.24</b>	<b>-1.99</b>	<b>-0.5%</b>
<b>Objects</b>					
01 Salaries and Wages	\$ 30,283,455	\$ 31,188,996	\$ 33,437,054	\$ 2,248,058	7.2%
02 Technical and Spec. Fees	383,881	509,753	488,026	-21,727	-4.3%
03 Communication	1,572,253	1,777,163	1,686,478	-90,685	-5.1%
04 Travel	127,426	158,566	158,433	-133	-0.1%
06 Fuel and Utilities	177,948	202,601	202,787	186	0.1%
07 Motor Vehicles	72,837	69,275	66,031	-3,244	-4.7%
08 Contractual Services	11,688,531	12,615,218	12,886,421	271,203	2.1%
09 Supplies and Materials	538,979	632,413	619,560	-12,853	-2.0%
10 Equipment – Replacement	240,292	343,176	340,230	-2,946	-0.9%
11 Equipment – Additional	455,179	280,946	280,591	-355	-0.1%
12 Grants, Subsidies, and Contributions	1,130,140	1,159,080	1,146,413	-12,667	-1.1%
13 Fixed Charges	1,894,437	2,161,263	2,076,764	-84,499	-3.9%
<b>Total Objects</b>	<b>\$ 48,565,358</b>	<b>\$ 51,098,450</b>	<b>\$ 53,388,788</b>	<b>\$ 2,290,338</b>	<b>4.5%</b>
<b>Funds</b>					
01 General Fund	\$ 24,545,964	\$ 25,999,314	\$ 28,576,811	\$ 2,577,497	9.9%
03 Special Fund	0	575,000	684,000	109,000	19.0%
05 Federal Fund	15,536,810	16,103,419	16,162,246	58,827	0.4%
09 Reimbursable Fund	8,482,584	8,420,717	7,965,731	-454,986	-5.4%
<b>Total Funds</b>	<b>\$ 48,565,358</b>	<b>\$ 51,098,450</b>	<b>\$ 53,388,788</b>	<b>\$ 2,290,338</b>	<b>4.5%</b>

Note: The fiscal 2015 working appropriation does not include January 2015 Board of Public Works reductions and deficiencies. The fiscal 2016 allowance does not reflect contingent or across-the-board reductions.

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Appendix 4

**Fiscal Summary  
DHMH – Administration**

<u>Program/Unit</u>	<u>FY 14 Actual</u>	<u>FY 15 Wrk Approp</u>	<u>FY 16 Allowance</u>	<u>Change</u>	<u>FY 15 - FY 16 % Change</u>
01 Executive Direction	\$ 13,880,207	\$ 14,370,739	\$ 15,120,584	\$ 749,845	5.2%
02 Financial Management Administration	31,347,157	33,740,840	35,439,177	1,698,337	5.0%
08 Major IT Projects	1,324,537	808,050	684,000	-124,050	-15.4%
01 Deputy Secretary for Behavioral Health	2,013,457	2,178,821	2,145,027	-33,794	-1.6%
<b>Total Expenditures</b>	<b>\$ 48,565,358</b>	<b>\$ 51,098,450</b>	<b>\$ 53,388,788</b>	<b>\$ 2,290,338</b>	<b>4.5%</b>
General Fund	\$ 24,545,964	\$ 25,999,314	\$ 28,576,811	\$ 2,577,497	9.9%
Special Fund	0	575,000	684,000	109,000	19.0%
Federal Fund	15,536,810	16,103,419	16,162,246	58,827	0.4%
<b>Total Appropriations</b>	<b>\$ 40,082,774</b>	<b>\$ 42,677,733</b>	<b>\$ 45,423,057</b>	<b>\$ 2,745,324</b>	<b>6.4%</b>
Reimbursable Fund	\$ 8,482,584	\$ 8,420,717	\$ 7,965,731	-\$ 454,986	-5.4%
<b>Total Funds</b>	<b>\$ 48,565,358</b>	<b>\$ 51,098,450</b>	<b>\$ 53,388,788</b>	<b>\$ 2,290,338</b>	<b>4.5%</b>

Note: The fiscal 2015 working appropriation does not include January 2015 Board of Public Works reductions and deficiencies. The fiscal 2016 allowance does not reflect contingent or across-the-board reductions.