

Department of Public Health DPH48500

Permanent Full-Time Positions

| Fund | Actual FY 20 | Actual FY 21 | Governor Estimated FY 22 | Original Appropriation FY 23 | Governor Revised FY 23 | Legislative FY 23 | Difference -Gov FY 23 |
|----------------|--------------|--------------|--------------------------|------------------------------|------------------------|-------------------|-----------------------|
| General Fund | 481 | 481 | 481 | 481 | 467 | 472 | 5 |
| Insurance Fund | 9 | 9 | 9 | 9 | 9 | 9 | - |

Budget Summary

| Account | Actual FY 20 | Actual FY 21 | Governor Estimated FY 22 | Original Appropriation FY 23 | Governor Revised FY 23 | Legislative FY 23 | Difference -Gov FY 23 |
|--|--------------------|--------------------|--------------------------|------------------------------|------------------------|--------------------|-----------------------|
| Personal Services | 33,589,585 | 33,510,972 | 35,165,281 | 37,985,722 | 36,470,300 | 36,700,300 | 230,000 |
| Other Expenses | 8,124,247 | 7,522,286 | 7,878,649 | 7,680,149 | 6,562,287 | 6,572,287 | 10,000 |
| Other Current Expenses | | | | | | | |
| LGBTQ Health and Human Services Network | 19,250 | 100,861 | 250,000 | 250,000 | 250,000 | 250,000 | - |
| Office of Pandemic Preparedness | - | - | 300,000 | 300,000 | 300,000 | 300,000 | - |
| Tobacco Prevention | - | - | - | - | 1,000,000 | 1,000,000 | - |
| Gun Violence Prevention | - | - | - | - | - | 400,000 | 400,000 |
| Other Than Payments to Local Governments | | | | | | | |
| Community Health Services | 1,481,549 | 1,481,549 | 3,586,753 | 3,586,753 | 3,586,753 | 1,696,753 | (1,890,000) |
| Rape Crisis | 548,128 | 548,128 | 548,128 | 548,128 | 548,128 | 548,128 | - |
| Grant Payments to Local Governments | | | | | | | |
| Local and District Departments of Health | 4,210,499 | 4,288,171 | 6,997,620 | 7,919,014 | 7,163,572 | 7,179,622 | 16,050 |
| School Based Health Clinics | 10,545,428 | 10,549,339 | 10,678,013 | 10,680,828 | 10,680,828 | 10,680,828 | - |
| Agency Total - General Fund | 58,518,686 | 58,001,306 | 65,404,444 | 68,950,594 | 66,561,868 | 65,327,918 | (1,233,950) |
| Needle and Syringe Exchange Program | 447,180 | 460,741 | 460,741 | 460,741 | 460,741 | 460,741 | - |
| Children's Health Initiatives | 2,891,743 | 2,987,030 | 2,996,411 | 3,014,016 | 3,014,016 | 3,014,016 | - |
| AIDS Services | 4,860,369 | 4,978,828 | 4,987,064 | 4,987,064 | 4,987,064 | 4,987,064 | - |
| Breast and Cervical Cancer Detection and Treatment | 2,065,512 | 2,148,155 | 2,193,048 | 2,205,486 | 2,205,486 | 2,305,486 | 100,000 |
| Immunization Services | 53,634,292 | 60,830,457 | 62,591,092 | 64,145,438 | 64,145,438 | 64,145,438 | - |
| X-Ray Screening and Tuberculosis Care | 776,370 | 503,429 | 966,804 | 968,026 | 968,026 | 968,026 | - |
| Venereal Disease Control | 179,998 | 184,298 | 197,341 | 197,341 | 197,341 | 197,341 | - |
| Agency Total - Insurance Fund | 64,855,464 | 72,092,938 | 74,392,501 | 75,978,112 | 75,978,112 | 76,078,112 | 100,000 |
| Total - Appropriated Funds | 123,374,150 | 130,094,244 | 139,796,945 | 144,928,706 | 142,539,980 | 141,406,030 | (1,133,950) |
| Additional Funds Available | | | | | | | |
| Carryforward Funding | - | - | - | - | 50,000 | 50,000 | - |
| American Rescue Plan Act | - | - | 4,250,000 | 4,000,000 | 59,314,606 | 52,079,000 | (7,235,606) |
| Agency Grand Total | 123,374,150 | 130,094,244 | 144,046,945 | 148,928,706 | 201,904,586 | 193,535,030 | (8,369,556) |

| Account | Governor Revised FY 23 | Legislative FY 23 | Difference from Governor |
|---------|------------------------|-------------------|--------------------------|
|---------|------------------------|-------------------|--------------------------|

Policy Revisions

Transfer Funding to Reflect Centralizing Information Technology Functions in DAS

| | | | |
|---------------------------------|--------------------|--------------------|---|
| Personal Services | (1,669,897) | (1,669,897) | - |
| Other Expenses | (1,121,072) | (1,121,072) | - |
| Total - General Fund | (2,790,969) | (2,790,969) | - |
| Positions - General Fund | (16) | (16) | - |

Background

The Governor's Revised FY 23 Budget centralizes Executive Branch IT functions in the Department of Administrative Services' new unit, the Bureau of Information Technology Solutions (BITS). This IT centralization transfers 483 positions and \$39 million in Personal Services and \$32 million in Other Expenses across all appropriated funds to DAS.

PA 22-118 (as amended by PA 22-146), the FY 23 Revised Budget, centralized certain Executive Branch IT functions in the Department of Administrative Services' new unit, the Bureau of Information Technology Solutions (BITS). This IT centralization transfers 219 positions and \$23,441,490 million in Personal Services, \$20,820,373 million in Other Expenses, and \$1,375,200 in Fringe Benefits across four appropriated funds to DAS.

Governor

Transfer \$2,790,969 (\$1,669,897 in Personal Services and \$1,121,072 in Other Expenses), and 16 positions, to reflect centralizing this agency's IT functions in DAS.

Legislative

Same as Governor.

Adjust Funding for Planned Parenthood of Southern New England (PPSNE)

| | | | |
|-----------------------------|---|--------------------|--------------------|
| Community Health Services | - | (1,890,000) | (1,890,000) |
| Total - General Fund | - | (1,890,000) | (1,890,000) |

Legislative

Reduce funding by \$1,890,000 to reflect that PPSE has received a Federal Title X grant.

Provide Funding for an Office of Gun Violence Prevention in OIVP

| | | | |
|---------------------------------|---|----------------|----------------|
| Gun Violence Prevention | - | 400,000 | 400,000 |
| Total - General Fund | - | 400,000 | 400,000 |
| Positions - General Fund | - | 2 | 2 |

Legislative

Provide funding of \$400,000 for an Office of Gun Violence Prevention within the Office of Injury and Violence Prevention (OIVP). Funding will support staff salaries (\$150,000) and operating expenses (\$250,000). Staff will include a Grants Administrator.

Provide Funding for Breast and Cervical Cancer Screening, Detection, and Treatment

| | | | |
|--|---|----------------|----------------|
| Breast and Cervical Cancer Detection and Treatment | - | 100,000 | 100,000 |
| Total - Insurance Fund | - | 100,000 | 100,000 |

Background

The Breast and Cervical Cancer Early Detection Program is a comprehensive screening program available throughout Connecticut for medically underserved women 21 to 64 years old. The primary objective of the program is to significantly increase the number of women who receive breast and cervical cancer screening, diagnostic, and treatment referral services. All services are offered free of charge through DPH's-contracted health care providers.

Legislative

Provide funding of \$100,000 to promote screening, detection, and treatment of breast and cervical cancer among unserved, or underserved populations, while giving priority consideration to women in minority communities who exhibit higher rates of breast cancer and cervical cancer than the general population. Services to women in minority communities will be prioritized, and the use of breast tomosynthesis for mammography and co-testing for cervical cancer detection that uses both the Pap test and HPV test, encouraged.

| Account | Governor Revised FY 23 | Legislative FY 23 | Difference from Governor |
|---------|------------------------|-------------------|--------------------------|
|---------|------------------------|-------------------|--------------------------|

Fund Stroke Registry

| | | | |
|---------------------------------|---|---------------|---------------|
| Personal Services | - | 72,000 | 72,000 |
| Other Expenses | - | 10,000 | 10,000 |
| Total - General Fund | - | 82,000 | 82,000 |
| Positions - General Fund | - | 1 | 1 |

Legislative

Provide funding of \$72,000 in Personal Services and one position and \$10,000 in Other Expenses to support the establishment of a stroke registry within the department.

Provide Funding for MIH Health Program Associate

| | | | |
|---------------------------------|---|---------------|---------------|
| Personal Services | - | 80,000 | 80,000 |
| Total - General Fund | - | 80,000 | 80,000 |
| Positions - General Fund | - | 1 | 1 |

Legislative

Provide funding of \$80,000 and one associate position to support the Mobile Integrated Health Care (MIH) program.

Fund Additional Position for Licensure

| | | | |
|---------------------------------|---|---------------|---------------|
| Personal Services | - | 78,000 | 78,000 |
| Total - General Fund | - | 78,000 | 78,000 |
| Positions - General Fund | - | 1 | 1 |

Legislative

Provide funding of \$78,000 in Personal Services and one position to support the department's licensure function.

Revise Water Testing Requirements for Private- and Semi-Public Wells

| | | | |
|---------------------------------|---------------|---------------|---|
| Personal Services | 68,268 | 68,268 | - |
| Total - General Fund | 68,268 | 68,268 | - |
| Positions - General Fund | 1 | 1 | - |

Background

Under the Governor's proposal, newly constructed private- and semi-public wells, and all private wells and semi-public wells that are part of a real estate transaction, will be required to be tested for total coliforms, nitrate, nitrite, sodium chloride, iron, manganese, hardness, turbidity, pH, sulfate, apparent color, odor, arsenic, and uranium.

Governor

Provide funding of \$68,268 to support the salary of an Epidemiologist 2 to develop and maintain an electronic database of related laboratory water quality test results. The Epidemiologist 2 will assist in analyzing data and informing local health directors, and the Department of Energy and Environmental Protection, of results that exceed a water quality action level or maximum contaminant level for appropriate follow up.

Legislative

Same as Governor

Reallocate Funding to a New Tobacco Prevention Account

| | | | |
|--|-------------|-------------|---|
| Tobacco Prevention | 1,000,000 | 1,000,000 | - |
| Local and District Departments of Health | (1,000,000) | (1,000,000) | - |
| Total - General Fund | - | - | - |

Background

Funding of \$1,000,000 was appropriated from the General Fund in FY 23 only in DPH's Local and District Departments of Health account. This account supports statutory, per capita subsidy formulas, in the FY 22 and FY 23 Biennial Budget, for local and district health departments to support their tobacco prevention activities. Initiatives will follow the Centers for Disease Control and Prevention's *Best Practice for Comprehensive Tobacco Control Programs*.

Governor

Transfer \$1,000,000 in FY 23 from DPH's Local and District Departments of Health account to a new Tobacco Prevention account, so that funding appropriated for statutory per capita grants in the Local and District Departments of Health account is not commingled with funding specifically designated for local and district health departments' tobacco prevention activities.

| Account | Governor Revised FY 23 | Legislative FY 23 | Difference from Governor |
|---------|------------------------|-------------------|--------------------------|
|---------|------------------------|-------------------|--------------------------|

Legislative
Same as Governor

Current Services

Adjust Funding for Local Health Departments and Districts

| | | | |
|--|----------------|----------------|----------|
| Local and District Departments of Health | 244,558 | 244,558 | - |
| Total - General Fund | 244,558 | 244,558 | - |

Background

Current statute requires, per CGS Sec. 19a-202, that full-time health departments that serve at least 50,000 people receive \$1.93 per capita per fiscal year from DPH, and district health departments that serve at least 50,000 people and/or at least three municipalities receive \$2.60 per capita. Prior to this change, DPH was statutorily required to provide \$1.18 per capita to eligible full-time health departments, and \$1.85 per capita to eligible district health departments.

Governor

Provide funding of \$244,558 to fully fund statutory per capita grants to 17 eligible full-time health departments and 20 eligible district health departments.

Legislative

Same as Governor

Implement Licensure of the Albert J. Solnit Children's Center

| | | | |
|---------------------------------|---------------|---------------|----------|
| Personal Services | 86,207 | 86,207 | - |
| Other Expenses | 3,210 | 3,210 | - |
| Total - General Fund | 89,417 | 89,417 | - |
| Positions - General Fund | 1 | 1 | - |

Background

PA 21-2 JSS required that the hospital and Psychiatric Residential Treatment Facility (PRTF) units of the Albert J. Solnit Children's Center, operated by the Department of Children and Families, be licensed by DPH. The Albert J. Solnit Children's Center is currently certified through the Centers for Medicare & Medicaid Services (CMS) and accredited by The Joint Commission. It has two physically separate campuses: Solnit North in East Windsor, and Solnit South in Middletown.

Solnit North has three PRTF cottages, with ten beds each, providing treatment to adolescent males 13 through 17 years old with complex psychiatric needs. Solnit South is a 45-bed psychiatric hospital, which provides acute, inpatient care to children and youth under 18 years of age, and 21 PRTF beds in three cottages for girls 13 through 17 years old.

Governor

Provide funding of \$89,417 for a Nurse Consultant, and related other expenses, to enable DPH to conduct inspections and complaint investigation activities related to the licensing of the Albert J. Solnit Children's Center.

Legislative

Same as Governor

Reflect New Member Town in Health District

| | | | |
|--|----------|---------------|---------------|
| Local and District Departments of Health | - | 16,050 | 16,050 |
| Total - General Fund | - | 16,050 | 16,050 |

Legislative

Provide funding of \$16,050 in the Local and District Departments of Health account to reflect that the town of Killingworth voted to join Connecticut River Health District.

| Account | Governor Revised FY 23 | Legislative FY 23 | Difference from Governor |
|---------|------------------------|-------------------|--------------------------|
|---------|------------------------|-------------------|--------------------------|

Carryforward

Provide Funding for IT Support for Well Water Testing Data

| | | | |
|-------------------------------------|---------------|---------------|----------|
| Other Expenses | 50,000 | 50,000 | - |
| Total - Carryforward Funding | 50,000 | 50,000 | - |

Background

The Governor's FY 23 Revised Budget carries forward \$188.6 million in surplus funding for various spending initiatives. This includes: 1) \$188.1 million in the General Fund; 2) \$400,000 in the Insurance Fund; and 3) \$100,000 in the Special Transportation Fund.

Governor

Provide carryforward funding of \$50,000 in FY 23 to support one-time data-system-development costs to accommodate revised water testing requirements for private- and semi-public wells.

Legislative

Same as Governor

American Rescue Plan Act

Provide Funding to Promote Healthy and Lead-Safe Homes

| | | | |
|---|-------------------|-------------------|---------------------|
| ARPA - CSFRF | 50,000,000 | 20,000,000 | (30,000,000) |
| Total - American Rescue Plan Act | 50,000,000 | 20,000,000 | (30,000,000) |

Background

The Governor's FY 23 Revised Budget allocates or reallocates \$1,120.3 million in ARPA funding for a variety of initiatives across 22 agencies. This funding is available due to: 1) reallocation of \$809.9 million in funding earmarked as FY 22 and FY 23 General Fund revenue replacement by SA 21-15, as amended by PA 21-2 JSS, and; 2) an available balance of ARPA funding totaling \$310.4 million that was previously unallocated. Funding is earmarked for use from FY 23 to FY 25.

Governor's Bill 5045 would reduce the blood lead levels (BLL) that trigger parental notifications and epidemiological investigations, to align with the Centers for Disease Control and Prevention and American Academy of Pediatrics recommendations. The bill would require annual blood lead testing of children 3- to 6-years-old who reside in high Social Vulnerability Index (SVI) neighborhoods with housing stock prior to 1960. Specified interventions are to occur at delineated BLL. In 2019, 1,188 children had a BLL over 5 micrograms per deciliter in Connecticut, a level at which the CDC recommends an investigation of the child's dwelling. Current statute required 78 dwellings undergo an epidemiological investigation. Under HB 5045, the homes of all 1,188 children would have had been investigated. New Haven, which has the highest percentage of children in Connecticut with elevated BLL, already operates under the standards set forth in Governor's Bill 5045. After New Haven, the towns with the highest BLLs are Bridgeport, Waterbury, Hartford, Meriden, Stamford, Danbury, Norwalk, West Haven, Norwich, and New Britain.

Governor

Provide funding of \$50,000,000 in FY 23, and \$20,000,000 in FY 24, to support lead investigation, abatement, and remediation to housing in Connecticut, at the municipal level, by providing the fiscal support needed to manage an increasing number of childhood lead cases with BLL that will require home inspections, abatement, and remediation. This work will involve:

- i. Conducting an epidemiological investigation of a child(ren)'s dwelling when a child(ren) has an elevated BLL,
- ii. Ensuring remediation of lead in paint and dust in dwellings that have poisoned a child(ren), and
- iii. Relocating the child(ren) and family while the dwellings are abated.

Legislative

Provide funding of \$20 million in FY 23, and \$10 million in FY 24, to support lead investigation, abatement, and remediation to housing in Connecticut, at the municipal level, by providing the fiscal support needed to manage an increasing number of childhood lead cases with BLL that will require home inspections, abatement, and remediation, per PA 22-49.

| Account | Governor Revised FY 23 | Legislative FY 23 | Difference from Governor |
|---------|------------------------|-------------------|--------------------------|
|---------|------------------------|-------------------|--------------------------|

Provide Funding for School Based Health Centers

| | | | |
|---|---|-------------------|-------------------|
| ARPA - CSFRF | - | 10,000,000 | 10,000,000 |
| Total - American Rescue Plan Act | - | 10,000,000 | 10,000,000 |

Background

The Governor’s FY 23 Revised Budget allocates or reallocates \$1,120.3 million in ARPA funding for a variety of initiatives across 22 agencies. This funding is available due to: 1) reallocation of \$809.9 million in funding earmarked as FY 22 and FY 23 General Fund revenue replacement by SA 21-15, as amended by PA 21-2 JSS, and; 2) an available balance of ARPA funding totaling \$310.4 million that was previously unallocated. Funding is earmarked for use from FY 23 to FY 25.

Legislative

Provide funding of \$10 million in FY 23 to support School Based Health Centers. These funds are to support policies contained in PA 22-80.

Provide Funding for Student Loan Repayment Program

| | | | |
|---|------------------|------------------|------------------|
| ARPA - CSFRF | 3,000,000 | 4,600,000 | 1,600,000 |
| Total - American Rescue Plan Act | 3,000,000 | 4,600,000 | 1,600,000 |

Background

Through a cooperative agreement with the Health Resources and Services Administration (HRSA), the DPH Primary Care Office (PCO) works with health care providers and communities to improve access to care for the underserved by helping primary care offices recruit and retain providers to practice in federally- designated Health Professional Shortage Areas (HPAs), or Federally Qualified Health Centers.

The National Health Service Corps (NHSC) Loan Repayment Program (LRP) offers medical and dental clinicians the opportunity to have their student loans repaid, while earning a competitive salary, in exchange for providing health care in urban, rural, or tribal communities with limited access to care. Under the NHSC, there is also a Students to Service Loan Repayment Program designed for medical students (MD, or DO), dental students (DMD, or DDS) and nursing students (NP, or CNM) in their final year of school from which they can receive loan repayment assistance in return for providing health care in urban, rural, or frontier communities with limited access to care. In addition, the NHSC has a scholarship program and offers loan repayment for nurses.

Governor

Provide funding of \$3,000,000 in FY 23, \$7,000,000 in FY 24, and \$7,000,000 in FY 25, to support a student loan repayment program for primary care clinicians, and behavioral health professionals: psychiatrists, psychologists, licensed clinical social workers, licensed marriage and family therapists, and licensed professional counselors.

DPH proposes mirroring its LRP eligibility criteria after NHSC's LRP and other federal LRPs. The amount of the loans will likely be \$25,000 per year, per individual, for 2 years, with an option of extending loan repayment a third and fourth year to encourage workforce retention in HPAs.

Legislative

Provide funding of \$4,600,000 in FY 23 and \$3,000,000 in FY 24 and FY 25, to support a student loan repayment program for primary care clinicians, and behavioral health professionals: psychiatrists, psychologists, licensed clinical social workers, licensed marriage and family therapists, and licensed professional counselors.

Provide Funding for Electronic Health Records at Gaylord Hospital

| | | | |
|---|---|------------------|------------------|
| ARPA - CSFRF | - | 2,600,000 | 2,600,000 |
| Total - American Rescue Plan Act | - | 2,600,000 | 2,600,000 |

Legislative

Provide funding of \$2,600,000 to reflect support for the implementation of electronic health records at Gaylord Hospital.

Pilot Program for Promoting Social Workers in Pediatrician Offices

| | | | |
|---|---|------------------|------------------|
| ARPA - CSFRF | - | 2,500,000 | 2,500,000 |
| Total - American Rescue Plan Act | - | 2,500,000 | 2,500,000 |

Legislative

Provide funding of \$2,500,000 for a pilot program for promoting social workers in pediatrician offices. These funds are to support policies contained in PA 22-81.

| Account | Governor Revised FY 23 | Legislative FY 23 | Difference from Governor |
|---------|------------------------|-------------------|--------------------------|
|---------|------------------------|-------------------|--------------------------|

Provide Funding for Menstrual Products

| | | | |
|---|----------|------------------|------------------|
| ARPA - CSFRF | - | 2,000,000 | 2,000,000 |
| Total - American Rescue Plan Act | - | 2,000,000 | 2,000,000 |

Legislative

Provide funding of \$2 million in support of the provisions of Sections 82-89 of PA 22-118.

Provide Funding for Community Violence Prevention Programs

| | | | |
|---|------------------|------------------|------------------|
| ARPA - CSFRF | 1,989,606 | 1,000,000 | (989,606) |
| Total - American Rescue Plan Act | 1,989,606 | 1,000,000 | (989,606) |

Background

The mission of DPH's Office of Injury and Violence Prevention (OIVP) is to promote a safe and healthy Connecticut by reducing factors associated with intentional (e.g., homicide and suicide) and unintentional (e.g., falls and motor vehicle) accidents. Current programs operated by the OIVP are: sexual violence prevention, suicide prevention, and opioid and prescription drug overdose prevention. Other primary programs are violence and homicide prevention, falls prevention, traffic and motor vehicle crash injury prevention, concussion and traumatic brain injury prevention, and elderly abuse and maltreatment awareness and education.

Governor

Provide funding of \$1,989,606 in FY 23, and \$1,644,811 in FY 24, to fund community gun violence prevention and intervention activities by DPH's Office of Injury and Violence Prevention. Funding will be used to:

1. Establish a Gun Violence Prevention and Intervention Program in the OIVP to effectively address and respond to the sharp rise in gun-involved homicides, stabbing/sharp force homicides, and homicides in general, in CT's communities since the start of the COVID-19 pandemic.
2. Support the growth of existing evidence-based, or evidence-informed, community violence and gun violence prevention and intervention programs throughout the state. This will be done through a grant program.
3. Support a Hospital Violence Intervention Program (HVIP) Collaborative Program Coordinator who will strengthen partnerships within the community, state, and federal agencies involved in community violence prevention and intervention. This position will build new partnerships and strengthen partnerships between community violence prevention services organizations and hospitals across Connecticut. The mission of the HVIP Collaborative is to strengthen and expand the HVIP safety net across the state through training, research, sharing of best practices and collaboration.
4. Contract with a statewide hospital-based injury prevention center with a history of community outreach and connections to trauma centers to:
 - a. Coordinate the project;
 - b. Assist with coordinating a mini-grant program that will award funds to qualified applicants from the community-based violence and gun violence prevention and intervention programs, including trauma-informed health and behavioral health care, and violence prevention professional training programs;
 - c. Conduct health education and trainings; and
 - d. Assess performance of initiated strategies.
5. Contract with a public health evaluator who will conduct a performance assessment of the project and measure the effectiveness of the strategies implemented over the three-year funding period. The Evaluator's role will include working with DPH and the Injury Prevention Contractor to: identify output and process measures, conduct an asset map of community violence prevention and intervention services, and design the project Evaluation and Performance Measurement Plan to demonstrate how the proposed project will meet short, intermediate, and long-term outcomes.
6. Continue timely surveillance of firearm and stabbing-involved homicides and assaults at DPH and build a data dissemination plan to share that data with state partners for focused public health prevention strategies and interventions.
7. Educate and build awareness of law enforcement leadership to designate the incident commander at a scene of a homicide or assault-related serious injury to call the United Way of CT/2-1-1's ACTION line or advise the victim's family members and friends who are in emotional distress to call the ACTION line. This service offers an array of supports and options to individuals in distress, including telephonic support; referrals and information about community resources and services; and/or transfer to the Mobile Crisis Team of their area. This training can be extended to other first responders and emergency department personnel who are on the frontlines of community violence-related injuries and deaths.

Legislative

Provide funding of \$1,000,000 in FY 23 to fund community gun violence prevention and intervention activities by DPH's Office of Injury and Violence Prevention. These funds are related to sections 80 and 81 of PA 22-118.

| Account | Governor Revised FY 23 | Legislative FY 23 | Difference from Governor |
|---------|------------------------|-------------------|--------------------------|
|---------|------------------------|-------------------|--------------------------|

Provide Funding for Child Psychiatrist Workforce Development

| | | | |
|---|----------|------------------|------------------|
| ARPA - CSFRF | - | 2,000,000 | 2,000,000 |
| Total - American Rescue Plan Act | - | 2,000,000 | 2,000,000 |

Legislative

Provide funding of \$2 million for Child Psychiatrist Workforce Development, pursuant to PA 22-47. Section 38 of PA 22-47 requires DPH to establish and administer a child and adolescent psychiatrist grant program to provide incentive grants to employers of child and adolescent psychiatrists for retaining and hiring new child psychiatrists.

Provide Funding to Address and Respond to an Increase in Homicides

| | | | |
|---|----------|------------------|------------------|
| ARPA - CSFRF | - | 1,500,000 | 1,500,000 |
| Total - American Rescue Plan Act | - | 1,500,000 | 1,500,000 |

Background

The Governor’s FY 23 Revised Budget allocates or reallocates \$1,120.3 million in ARPA funding for a variety of initiatives across 22 agencies. This funding is available due to: 1) reallocation of \$809.9 million in funding earmarked as FY 22 and FY 23 General Fund revenue replacement by SA 21-15, as amended by PA 21-2 JSS, and; 2) an available balance of ARPA funding totaling \$310.4 million that was previously unallocated. Funding is earmarked for use from FY 23 to FY 25.

Legislative

Provide funding of \$1.5 million for grants in the Office of Injury and Violence Prevention.

Provide Funding for ICHC School Based Health Centers

| | | | |
|---|----------|----------------|----------------|
| ARPA - CSFRF | - | 604,000 | 604,000 |
| Total - American Rescue Plan Act | - | 604,000 | 604,000 |

Legislative

Provide funding of \$604,000 for InterCommunity Health Care (ICHC) School Based Health Centers in East Hartford.

Provide Funding for Storage and Maintenance Costs of COVID-19 Preparedness Supplies

| | | | |
|---|----------------|----------------|----------|
| ARPA - CSFRF | 325,000 | 325,000 | - |
| Total - American Rescue Plan Act | 325,000 | 325,000 | - |

Background

DPH stockpiled a cache of Personal Protective Equipment (PPE), including N95s, surgical masks, single use isolation gowns, and gloves, to augment the state’s overall supply to support health and medical organizations. Its Office of Public Health Preparedness and Response currently manages several hundred ventilators and Powered Air Purifying Respirators (PAPRs). The PAPRs and some of the ventilators are owned by DPH, purchased several years ago with federal grant funds. Many of the DPH-owned ventilators are staged at hospitals and require annual maintenance. During the COVID-19 response, the state purchased 100 ventilators. These ventilators are stored in climate-controlled units and require preventive maintenance next year. Connecticut also received over 300 ventilators from the federal Strategic National Stockpile (SNS). Most of these ventilators have been returned to the SNS, but some remain at hospitals and in DPH’s storage facility. Through the Federal Emergency Management Agency, DPH received a supply of nearly 1,000 PAPRs. Most of these PAPRs were distributed to hospitals and Emergency Medical Services agencies. DPH reserved a supply for nursing homes, which are stored at the Meyers Warehouse.

During the COVID-19 surge in the Spring of 2020, Connecticut requested and received a 250-bed Federal Medical Station (FMS), which is a rapidly deployable cache managed by SNS that contain beds, supplies, and medicines that can quickly turn a pre-identified building into a temporary medical shelter during a national emergency. The FMS was set-up in an athletic facility at Southern Connecticut State University for several months. The FMS was eventually demobilized, inventoried, and it is stored at the Meyers Warehouse.

Governor

Provide funding of \$325,000 in FY 23 is needed for the proper storage and servicing of PPEs, ventilators, PAPRs, and the FMS. A breakout is provided in the table below.

| Account | Governor Revised FY 23 | Legislative FY 23 | Difference from Governor |
|---------|------------------------|-------------------|--------------------------|
|---------|------------------------|-------------------|--------------------------|

| Item | Category | Cost Per | Quantity | FY 23 Cost |
|----------------------------|----------|------------------------|---------------|----------------|
| Ventilator Service | Service | \$1,400 every 2 years | 100 | 140,000 |
| FMS Storage | Storage | \$1.25 per sq. ft./mo. | 3,800 sq ft | 45,000 |
| PPE | Storage | \$1.25 per sq. ft./mo. | 3,000 sq ft | 52,230 |
| Life Transport Ventilators | Service | \$2,700 monthly | - | 32,400 |
| Impact Ventilators | Service | \$410 per ventilator | 79 | 32,390 |
| Ventilator | Storage | \$1.5 per sq. ft./mo. | 600 sq ft | 10,800 |
| Moving/Delivering Items | Service | \$500 monthly | - | 6,000 |
| FMS Storage | Storage | \$1.25 per sq. ft./mo. | 3,000 sq. ft. | 4,500 |
| Connex Boxes | Storage | \$140 monthly | 12 | 1,680 |
| TOTAL | | | | 325,000 |

Legislative

Same as Governor.

Fund E-cigarette and Marijuana Prevention Pilot Program

| | | | |
|---|----------|----------------|----------------|
| ARPA - CSFRF | - | 300,000 | 300,000 |
| Total - American Rescue Plan Act | - | 300,000 | 300,000 |

Legislative

Provide funding of \$300,000 to support an e-cigarette and marijuana prevention pilot program to be conducted by Yale in Stamford, Milford, and East Haven.

Provide Funding for CT VIP Street Outreach

| | | | |
|---|----------|----------------|----------------|
| ARPA - CSFRF | - | 300,000 | 300,000 |
| Total - American Rescue Plan Act | - | 300,000 | 300,000 |

Legislative

Provide funding of \$300,000 for CT VIP Street Outreach in New Haven.

Provide Funding for CCMC - Pediatrician Training

| | | | |
|---|----------|----------------|----------------|
| ARPA - CSFRF | - | 150,000 | 150,000 |
| Total - American Rescue Plan Act | - | 150,000 | 150,000 |

Background

The Governor's FY 23 Revised Budget allocates or reallocates \$1,120.3 million in ARPA funding for a variety of initiatives across 22 agencies. This funding is available due to: 1) reallocation of \$809.9 million in funding earmarked as FY 22 and FY 23 General Fund revenue replacement by SA 21-15, as amended by PA 21-2 JSS, and; 2) an available balance of ARPA funding totaling \$310.4 million that was previously unallocated. Funding is earmarked for use from FY 23 to FY 25.

Legislative

Provide funding of \$150,000 in FY 23 to support Connecticut Children's Medical Center's Pediatrician Training, per PA 22-47.

Provide Funding for Community Health Worker Association of Connecticut

| | | | |
|---|----------|----------------|----------------|
| ARPA - CSFRF | - | 100,000 | 100,000 |
| Total - American Rescue Plan Act | - | 100,000 | 100,000 |

Background

The Community Health Workers Association of Connecticut (CHWACT) is a section of the CT Public Health Association. CHWACT acts as the statewide professional association for Community Health Workers (CHWs) in the state.

Legislative

Provide funding of \$100,000 for CHWACT.

| Account | Governor Revised FY 23 | Legislative FY 23 | Difference from Governor |
|---------|------------------------|-------------------|--------------------------|
|---------|------------------------|-------------------|--------------------------|

Provide Funding for Durational Loan Manager

| | | | |
|---|----------|----------------|----------------|
| ARPA - CSFRF | - | 100,000 | 100,000 |
| Total - American Rescue Plan Act | - | 100,000 | 100,000 |

Legislative

Provide funding of \$100,000 for a durational loan manager.

Totals

| Budget Components | Governor Revised FY 23 | Legislative FY 23 | Difference from Governor |
|-------------------------------|------------------------|-------------------|--------------------------|
| Original Appropriation - GF | 68,950,594 | 68,950,594 | - |
| Policy Revisions | (2,722,701) | (3,972,701) | (1,250,000) |
| Current Services | 333,975 | 350,025 | 16,050 |
| Total Recommended - GF | 66,561,868 | 65,327,918 | (1,233,950) |
| Original Appropriation - IF | 75,978,112 | 75,978,112 | - |
| Policy Revisions | - | 100,000 | 100,000 |
| Total Recommended - IF | 75,978,112 | 76,078,112 | 100,000 |

| Positions | Governor Revised FY 23 | Legislative FY 23 | Difference from Governor |
|-------------------------------|------------------------|-------------------|--------------------------|
| Original Appropriation - GF | 481 | 481 | - |
| Policy Revisions | (15) | (10) | 5 |
| Current Services | 1 | 1 | - |
| Total Recommended - GF | 467 | 472 | 5 |
| Original Appropriation - IF | 9 | 9 | - |
| Total Recommended - IF | 9 | 9 | - |