

Agency Presentation - FY13 - Health

Wednesday, January 25, 2012
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SOUTH DAKOTA
DEPARTMENT OF HEALTH

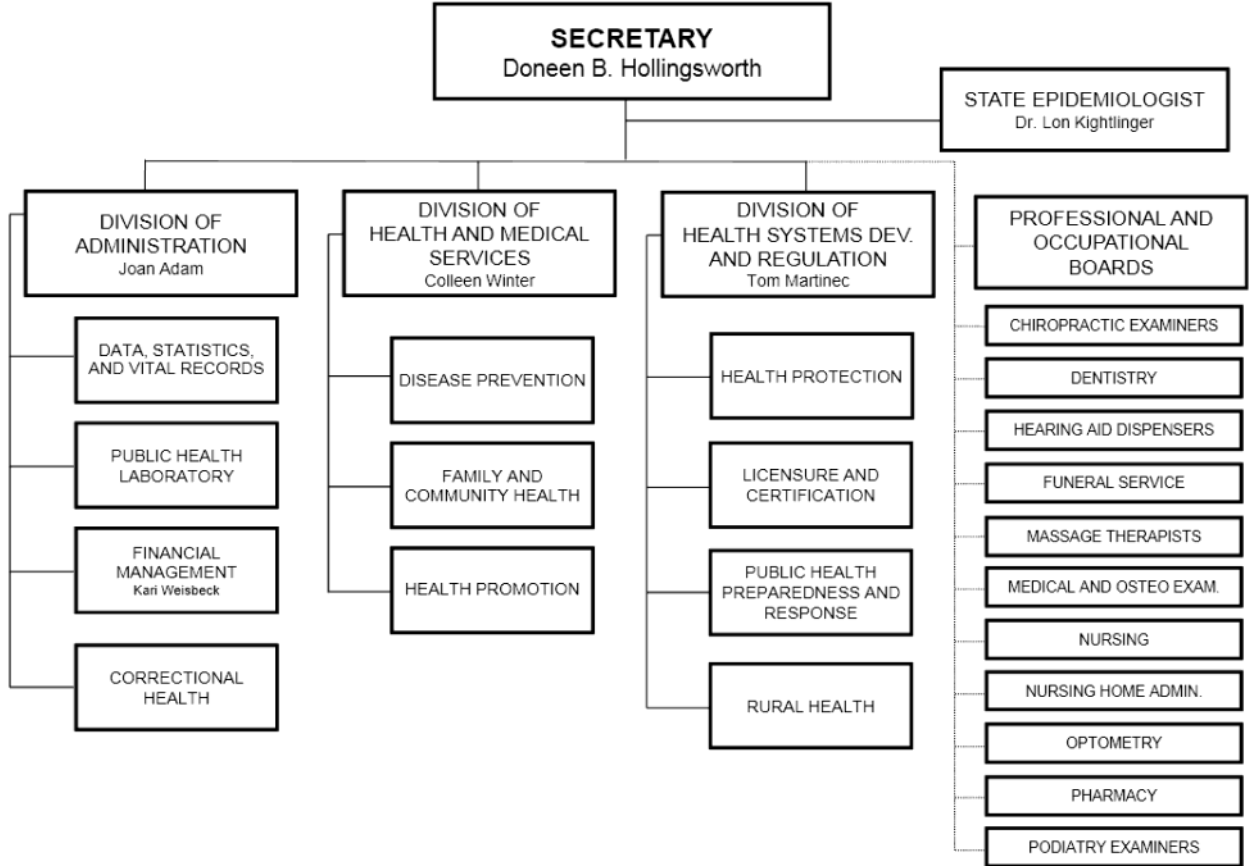
FY2013 BUDGET RECOMMENDATION AND OVERVIEW MATERIALS
Presented to Joint Appropriations Committee
January 30, 2012

DEPARTMENT OF HEALTH MISSION STATEMENT

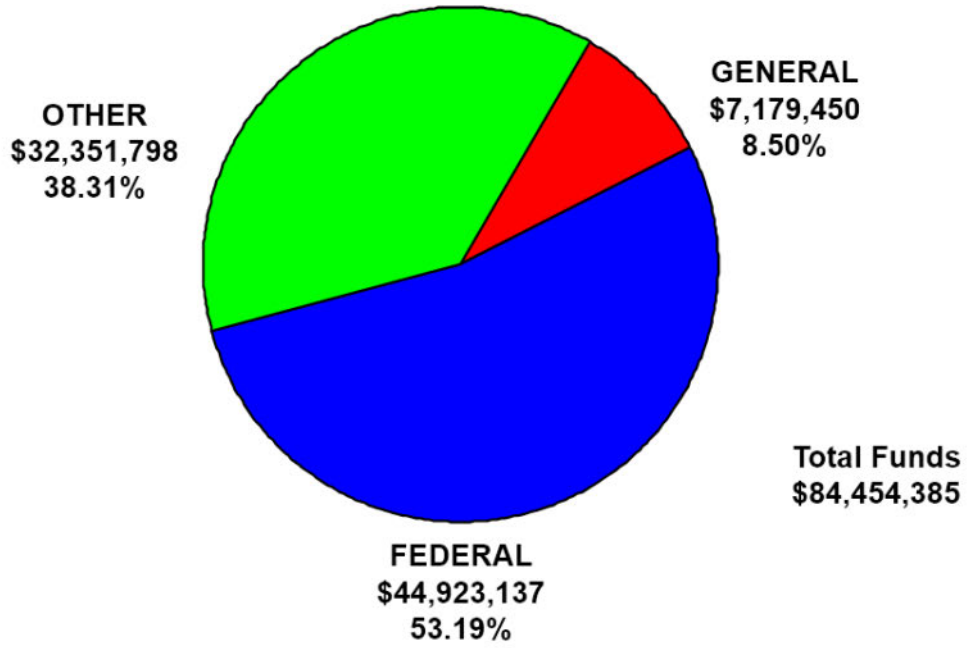
The mission of the South Dakota Department of Health is to:

- Promote, protect, and improve the health and well-being of all South Dakotans

SOUTH DAKOTA DEPARTMENT OF HEALTH



DEPARTMENT OF HEALTH FY13 FUNDING SOURCES





South Dakota Department of Health 2020

Promote, protect, and improve the health and well-being of all South Dakotans

Improve Birth Outcomes and Health of Infants, Children and Adolescents in South Dakota

- Increase awareness of the importance of healthy lifestyle choices among women of childbearing age
- Improve South Dakota's age-appropriate immunization rate
- Reduce risky behaviors among children and adolescents

Key Performance Measures

- Reduce infant mortality rate from 8.3 per 1,000 births in 2008 to 6.0 by 2020
- Increase proportion of pregnant women who receive prenatal care in the first trimester from 68.9% in 2008 to 75% by 2020
- Increase percent of two-year olds who are age-appropriately immunized from 81% in 2010 to 90% by 2020
- Reverse trend and reduce the percent of school-age children & adolescents who are obese from 18.8% in the 2008-09 school year to 14% by 2020
- Reduce teen pregnancy rate from 21 per 1,000 teens age 15-17 in 2008 to 15 by 2020
- Reduce the percentage of youth in grades 9-12 who currently smoke from 25% in 2007 to 18% by 2020

Strengthen the Health Care Delivery System in South Dakota

- Provide effective oversight and assistance to assure quality health facilities, professionals and services
- Sustain essential healthcare services in rural and underserved areas
- Provide effective coordination of health information technology (HIT) and health information exchange (HIE) efforts among public and private stakeholders

Key Performance Measures

- Increase the number of Scrubs health career camp attendees from 877 in 2009 to 1,500 by 2020
- Increase the percent of South Dakota nursing facilities that participate in resident-directed or person-centered care from 86% in 2009 to 90% by 2020
- Maintain a closure rate of zero for rural hospitals determined to be "access critical"
- Increase the percentage of hospitals and clinics that are meaningful users of electronic health records from 32% in 2008 to 90% by 2020
- Increase the percentage of hospitals and clinics participating in the statewide health information exchange to 90% by 2020

Guiding Principles
Reduce Health Disparities
Maximize Use of Technology
Emphasize Customer Service
Work in Partnership

Improve the Health Behaviors of South Dakotans to Reduce Chronic Disease (i.e., heart disease, cancer, stroke, diabetes)

- Work with partners to implement statewide plans to reduce the burden of chronic disease
- Help South Dakotans across the lifespan to be physically active, eat healthy and be tobacco free
- Increase the number of people screened for chronic disease (i.e., mammograms, Pap smears, colorectal cancer, diabetes, cholesterol, hypertension, etc.)

Key Performance Measures

- Reverse the trend and reduce the percent of adults who are obese from 28.1% in 2008 to 23% by 2020
- Increase the percent of adults who are physically active on a regular basis from 47.3% in 2007 to 57% by 2020
- Reverse the trend and increase the percent of adults who eat 5 fruits & vegetables a day from 13.8% in 2007 to 25% by 2020
- Reduce the percent of adults who smoke cigarettes from 17.5% in 2008 to 15% in 2020
- Increase the number of adults over age 50 who have had colorectal screening from 71.4% in 2008 to 85% by 2020

Strengthen South Dakota's Response to Current and Emerging Public Health Threats

- Maintain and improve the identification and assessment of current and emerging public health threats
- Enhance the state's capacity to effectively coordinate the response to current and emerging public health threats
- Establish a dedicated environmental health program within the Department of Health to respond to environmental health issues

Key Performance Measures

- Increase the rate of disease reporting electronically from 50% of reports in 2008 to 90% by 2015
- Double the number of healthcare volunteers registered in SERV-SD from 649 in 2009 to 1,200 by 2020
- Increase the expertise of DOH environmental health staff by achieving 100% of staff meeting the qualifications of being a Registered Environmental Health Specialist according to the National Environmental Health Association by 2020

doh.sd.gov

Strategies for Achieving 2020 Objectives

<p>Improve Birth Outcomes and Health of Infants, Children and Adolescents in South Dakota</p> <ul style="list-style-type: none"> □ Increase awareness of the importance of healthy lifestyle choices to women of child bearing age (<i>Peggy Seurer</i>) <ul style="list-style-type: none"> -Promote the importance of prenatal care for South Dakota mothers -Maintain collaboration between public programs serving pregnant women and primary care providers to improve birth outcomes -Enhance activities and increase public awareness regarding the dangers of tobacco use by pregnant women and exposure to secondhand smoke □ Improve South Dakota's age-appropriate immunization rate (<i>Bonnie Jameson</i>) <ul style="list-style-type: none"> -Educate providers and the public about the importance of immunizations -Create interface between electronic health records and the immunization registry -Utilize non-traditional avenues for providing childhood immunizations □ Reduce risky behaviors among children and adolescents (<i>Darlene Bergeleen</i>) <ul style="list-style-type: none"> -Promote activities directed at reducing the incidence of childhood obesity -Enhance activities designed to reduce rates of pregnancy and sexually transmitted diseases among adolescents -Enhance activities and increase public awareness to reduce the use of tobacco products among children and adolescents -Enhance partnerships/collaboration with other state agencies to address risky behaviors (i.e., suicide, motor vehicle crashes, etc.) 	<p>Improve the Health Behaviors of South Dakotans to Reduce Chronic Disease (i.e., heart disease, cancer, stroke, diabetes)</p> <ul style="list-style-type: none"> □ Work with partners to implement statewide plans to reduce the burden of chronic disease (<i>Linda Ahrendt</i>) <ul style="list-style-type: none"> -Develop and implement policies and environmental changes to support healthy behaviors and manage chronic disease -Engage additional partners (i.e., health providers, communities, service organizations, etc.) to expand the reach and impact of state chronic disease plans □ Help South Dakotans across the lifespan to be physically active, eat healthy, and be tobacco free (<i>Kristin Bischoff</i>) <ul style="list-style-type: none"> -Utilize current communication methods and technology to market and promote programs to help South Dakotans live healthier lives -Enhance efforts to provide technical assistance and resources for individuals, families, communities, schools, employers, and health care providers to promote healthy behaviors and prevent chronic disease □ Increase the number of people screened for chronic diseases (i.e., mammograms, Pap smears, colorectal screening, diabetes, cholesterol, hypertension, etc.) (<i>Norma Schmidt</i>) <ul style="list-style-type: none"> -Increase public awareness of the importance of chronic disease screenings -Work with partners to assure accessibility to chronic disease screening for all South Dakotans
<p>Strengthen the Healthcare Delivery System in South Dakota</p> <ul style="list-style-type: none"> □ Provide effective oversight and assistance to assure quality health facilities, professionals, and services (<i>Bob Stahl</i>) <ul style="list-style-type: none"> -Assure healthcare facilities meet minimum standards for quality -Enhance technical assistance, training, and resources for healthcare facilities and providers to meet identified needs -Assure information regarding healthcare facilities, providers, and services is available to the public in a coordinated, understandable, and easily accessible manner -Increase coordination with health professional licensing boards to address quality of care and access to care issues □ Sustain essential healthcare services in rural and underserved areas (<i>Sandi Durick/Halley Lee</i>) <ul style="list-style-type: none"> -Build and sustain South Dakota's healthcare workforce -Develop and promote systems of care to assure high quality, readily accessible, and well-coordinated healthcare services statewide -Promote and develop innovative primary care delivery models in rural areas -Develop and implement quality improvement programming and services -Assist healthcare organizations identify resources for operation, maintenance, and replacement of healthcare facilities □ Provide effective coordination of HIT/HIE efforts among public and private stakeholders (<i>Kevin DeWald/Ken Doppenberg</i>) <ul style="list-style-type: none"> -Encourage adoption and meaningful use of electronic health records through use of federal incentive programs -Promote the formation and use of a regional center to advance HIT adoption among providers -Link Critical Access Hospitals with educational and technical assistance resources for implementation of health information systems 	<p>Strengthen South Dakota's Response to Current and Emerging Public Health Threats</p> <ul style="list-style-type: none"> □ Maintain and improve the identification and assessment of current and emerging public health threats (<i>Lan Kightlinger</i>) <ul style="list-style-type: none"> -Develop and maintain State Public Health Laboratory proficiency in all applicable Laboratory Response Network procedures -Increase electronic disease reporting and maintain continuing functional electronic laboratory reporting competency within the Department of Health □ Enhance the state's capacity to effectively coordinate the response to current and emerging public health threats (<i>Bill Chalcraft</i>) <ul style="list-style-type: none"> -Improve the Department of Health's ability to electronically monitor and track response efforts and interventions -Identify, coordinate, and train the state, local, private, and volunteer public health workforce □ Establish a dedicated environmental health program within the Department of Health to respond to environmental health issues (<i>Clark Hepper/Mike Smith</i>) <ul style="list-style-type: none"> -Develop key capacity to respond to current and emerging environmental health issues (i.e., lead, mold, indoor air, nuisance investigations, etc.) -Identify, train, and maintain staff proficient in dealing with environmental health issues

FY12 Budget

- FY12 DOH budget was reduced by 11%.
- All reductions will be sustained in the FY13 base budget.

DEPARTMENT OF HEALTH FY2013 GOVERNOR RECOMMENDED BUDGET

	<u>FTE</u>	<u>General</u>	<u>Federal</u>	<u>Other</u>	<u>Total</u>
FY2012 Budget Base	402.2	\$6,979,125	\$43,175,633	\$32,444,643	\$82,599,401
Expansion/Reduction					
<i>Increase/Decrease</i>					
Health Administration		27,214	45,124	22,102	94,440
Health Systems Regulation and Development		78,659	175,794	676	255,129
Health and Medical Services	9.0	94,452	1,501,170	84,025	1,679,647
Laboratory Services			15,668	55,725	71,393
Correctional Health				(307,533)	(307,533)
Tobacco Prevention and Control			7,696		7,696
Informational Budgets for DOH Boards			2,052	52,160	54,212
Inflation/Expansion-Reduction Total	9.0	200,325	1,747,504	(92,845)	1,854,984
Total FY2013 Recommended Budget	411.2	7,179,450	44,923,137	32,351,798	84,454,385

FY13 Budget

- \$1,000,000 in Tobacco funding transferred to General Fund.
- (\$720,478) reduction in Correctional Health prescription drugs due to electronic dispensing system.
- \$349,000 one time appropriation to purchase flu vaccine for 6 – 18 yr. olds for FY13 (SB48).

Governor's Task Force on Infant Mortality

Bright Start Nurse Home Visiting Program

- Goal: Improve birth outcomes and health of children and families in at-risk communities.
- Expand Bright Start Nurse Home Visiting Program at Pine Ridge and Sisseton with two additional locations to be identified.
- \$1,000,000 Federal Fund Authority and 9.0 FTE Registered Nurses.

Correctional Health

FY2013 Governor Recommended

FY12 Base Budget	\$15,688,135
Medical Inflation	
• <i>Contractual Services:</i> A 1.8% inflation rate for contracted medical provider services.	\$ 13,635
Prescription Drug – Pharmacy Change	\$ (720,478)
Salary Policy	\$ 396,525
Bureau Billing	\$ <u>2,785</u>
FY13 Budget Request	\$15,380,602
FY13 Requested Other Funds Decrease	\$ (307,533)

Top 25 Inmates Expenses using Out-Sourced Services July 1, 2010 – June 30, 2011

		<u>Diagnosis</u>
1	\$ 151,384.38	Diabetic complications, hospitalized
2	\$ 124,225.02	Tongue cancer and radiation
3	\$ 111,341.20	Back surgery/fusion
4	\$ 108,435.64	Diabetic with kidney failure, on dialysis; hospitalization for pneumonia
5	\$ 101,494.67	Stroke
6	\$ 91,729.86	Hospitalized, abdominal wound
7	\$ 91,052.85	Cancer lymphoma
8	\$ 83,117.98	Insulin dependent diabetic with skin ulcers
9	\$ 66,694.91	Cancer lymphoma
10	\$ 65,914.81	Renal failure
11	\$ 62,282.10	HIV and Hepatitis C, on HIV meds, hemophiliac
12	\$ 58,488.42	Lung cancer, radiation treatment
13	\$ 55,690.27	Asthma, Crohns disease
14	\$ 53,628.81	Leg fracture, surgical repair and then a wound infection
15	\$ 52,402.58	Rectal cancer
16	\$ 44,837.99	Hypertension, heart catheterization, coronary artery disease
17	\$ 43,047.07	Angina, chest pain
18	\$ 42,863.28	Blood clot, surgery
19	\$ 40,019.57	Hospitalized for pneumonia resulting in a vent
20	\$ 39,359.43	Stomach ulcer, bleeding
21	\$ 38,635.45	HIV
22	\$ 38,083.45	Hepatitis B & C, frequent removal of fluid from distended abdomen
23	\$ 37,384.60	Chronic hepatitis C with cirrhosis of the liver
24	\$ 36,349.53	Tongue cancer
25	\$ 36,156.06	Colon cancer
Grand Total	\$ 1,674,619.92	

Top 25 Inmates Expenses using Out-Sourced Service

