

New York City Council

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**Hearing on the Mayor's Fiscal Year 2012 Preliminary Budget &
the Fiscal Year 2011 Preliminary Mayor's Management Report**

Department of Health and Mental Hygiene

March 28, 2011

Committee on Health

Hon. Maria del Carmen Arroyo, Chair

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Summary and Highlights

Department of Health and Mental Hygiene						
<i>Dollars in thousands</i>						
	2009	2010	2011	2011	2012	Difference*
	Actual	Actual	Adopted	Feb Plan	Feb Plan	2012 vs. 2011
Public Health						
Personal Services**	\$396,825	\$409,537	\$384,452	\$407,041	\$376,767	(\$7,685)
Other than Personal Services**	583,229	535,943	524,539	573,432	477,937	(46,602)
Sub-Total	\$980,054	\$945,480	\$908,991	\$980,472	\$854,704	(\$54,287)
Division of Mental Hygiene						
Personal Services	\$2,100	\$2,243	\$5,641	\$2,948	\$3,683	(\$1,959)
Other than Personal Services	730,051	737,729	684,729	692,140	684,512	(217)
Sub-Total	\$732,151	\$739,971	\$690,370	\$695,088	\$688,194	(\$2,176)
Table Total	\$1,712,205	\$1,685,452	\$1,599,361	\$1,675,560	\$1,542,898	(\$56,463)

*The difference of Fiscal 2011 Adopted compared to Fiscal 2012 Preliminary Plan funding

**Includes the Department's Administration - General Funding

The Department of Health and Mental Hygiene's Fiscal 2012 Preliminary Budget includes \$1.5 billion in spending, of which \$578 million is funded with City tax levy (CTL) dollars. The Department's overall operating budget for Fiscal 2012 has decreased by \$56 million, or 3.5 percent, compared to the operating budget at Adoption last year. This reduction is the result of a number of Programs to Eliminate the Gap (PEGs) proposed by the Department to meet its spending targets while offsetting planned spending increases for collective bargaining agreements and technical adjustments.

As outlined in the chart above, public health programming accounts for 96 percent, or \$54 million, of the Department's total reduction in funding. The Administration is proposing to spend \$16.4 million less in City tax levy funds within the Division of Mental Hygiene (DMH) for Fiscal 2012 when compared to the Fiscal 2011 Adopted Budget; however, these reductions in City spending have been mostly offset by increased state and federal aid, lessening the Division's net decrease in spending to only \$2 million.

Fiscal 2012 Preliminary Plan Highlights

- Departmental Layoffs.** The Department proposes layoffs of 142 employees as part of its PEG program for Fiscal 2012. The chart below outlines the total headcount reduction by program area and types (layoffs, attrition, and vacancy). Further actions in the Fiscal 2012 Preliminary Budget are highlighted below by program area.

Program Area	Layoff	Attrition	Vacancy Reduction	Total
OCME	--	(27)	--	(27)
TB Clinical Care	(13)	(1)	--	(14)
Agencywide	(30)	(41)	--	(71)
Central Administration	(8)	--	(1)	(9)
Public Health Labs	(11)	(4)	--	(15)
Correctional Health	--	--	(2)	(2)
PS Underspending & Efficiencies	--	--	(4)	(4)
Total	(62)	(73)	(7)	(142)

Disease Prevention & Treatment – HIV/AIDS

- **Reduced pass-through funding to HHC for HIV/AIDS supportive services.** The Department proposes reducing its pass-through (intra-city) funding to HHC for HIV/AIDS supportive services by \$112,975 in Fiscal 2011 and \$186,994 in Fiscal 2012. Specifically, these reductions would be distributed among HHC's satellite and assessment services and its outpatient pharmacy. **(See Page 14 for more details.)**

Disease Prevention & Treatment

- **Reductions to Public Health Lab Testing.** The Department is proposing to eliminate several ancillary tests from its overall testing. These tests are not part of the core set of tests administered by the DOH. Testing for these items is available through other vendors and would be outsourced. Four positions would be lost through attrition. Total estimated reduced spending on Public Health Labs is estimated at \$164,000 for Fiscal 2011 and \$259,000 for Fiscal 2012. **(See Page 19 for more details.)**
- **Public Health Labs Layoffs.** The Department proposes layoffs of 11 staff in response to the proposed reductions and/or eliminations in Public Health Lab testing, with estimated reduced spending on Public Health Labs of \$225,000 for Fiscal 2011 and \$857,000 for Fiscal 2012. **(See Page 19 for more details.)**
- **Reduction to TB Direct Clinical Care.** The Department proposes to eliminate two of its seven TB clinic locations, one in Chelsea and one in Bedford. In addition to these closures, the Department proposes reduced hours of operation for the remaining five clinics. Total estimated savings through these reductions in direct TB clinical care are estimated at \$166,000 in Fiscal 2011 and \$494,000 in Fiscal 2012. **(See Page 19 for more details.)**
- **TB Direct Clinical Care Layoffs.** The Department proposes reducing personal service-related spending for TB Direct Clinical Care by eliminating 13 positions via layoffs. Savings achieved through these layoffs are estimated to be \$216,000 in Fiscal 2011 and \$914,000 in Fiscal 2012. These layoffs are attributed to the closure of two TB clinics described directly above. **(See Page 19 for more details.)**

Health Promotion & Disease Prevention

- **Funding Shift in School Health Revenue.** The Department would realize savings to the City in the amount of \$6.4 million in Fiscal 2011 and \$8.2 million in Fiscal 2012 through claiming additional Medicaid reimbursement for School Health Early Periodic Screening and Diagnostic Treatment (EPSDT). **(See Page 23 for more details.)**

Environmental Health

- **Reductions in Pass-Through Funding.** The Department proposes to reduce its intra-city funding to the Department of Housing Preservation and Development (HPD) and to the Department of Environmental Protection (DEP) by a total of \$59,000 in Fiscal Years 2011 and 2012. These reductions are proportional to the DOH's required savings target for both fiscal years. **(See Page 26 for more details.)**

Health Care Access & Improvement

- **Correctional Health – Vacancy and Contract Reductions.** The Department proposes to reduce spending on Correctional Health services by \$1.13 million in Fiscal 2011 and \$2.27 million in Fiscal 2012. These savings would be achieved through vacancy reductions and operational efficiencies to ancillary and supportive services. **(See Page 31 for more details.)**
- **Eliminate funding to Two School Based Health Centers (SBHCs).** The Department proposes to reduce spending on SBHCs by \$285,000 in Fiscal 2012 and in the outyears by eliminating funding to the following SBHCs: Thurgood Marshall Academy for Learning and Social Change and George W. Wingate High School. These SBHCs were selected due to low capacity and low performance, respectively. **(See Page 31 for more details.)**
- **HHC Intra-City Agreement Reductions to Child Health Clinics.** The Department proposes to reduce its HHC Intra-City agreement (pass-through funding) for child health clinics by \$224,000 in Fiscal 2011 and \$448,000 in Fiscal 2012. **(See Page 31 for more details.)**

Epidemiology

- **Agencywide Layoffs – Epidemiology.** The Department proposes to achieve savings of \$36,000 in Fiscal 2011 and nearly \$106,000 in Fiscal 2012 in total spending from two staff layoffs. These layoffs would affect administrative functions which would be absorbed by existing staff and may result in delayed/reduced support services for the Division of Epidemiology. **(See Page 36 for more details.)**
- **Agencywide Program Reductions and Efficiencies – Epidemiology.** The Department proposes to achieve savings of \$329,000 in Fiscal 2011 and nearly \$416,000 in Fiscal 2012 in total spending through a combination of staff attrition and program vacancies. Additionally, efficiencies would be achieved by reducing journal subscriptions, software purchasing, upgrades to electronic systems and the scope of study of supportive housing. **(See Page 36 for more details.)**

Office of Chief Medical Examiner

- **OCME – Additional Revenue.** The OCME would claim additional Article 6 funding from the State, using the additional revenue to supplant City tax levy dollars in the amount of \$27,000 in Fiscal 2011 and \$40,000 in Fiscal 2012. **(See Page 38 for more details.)**
- **OCME – Grant Revenue.** The OCME would shift staff costs to various grants, achieving savings to the City in the amount of \$464,000 in Fiscal 2011 and \$116,000 in Fiscal 2012. These grants – mainly, the federal Edward Byrne Grant and other homeland security grants – would be used to fund some positions previously funded through City tax levy. **(See Page 38 for more details.)**
- **OCME – Layoffs.** OCME would generate savings of \$796,000 in Fiscal 2012 through layoffs of 17 staff. These positions come from a variety of program areas. While these layoffs are not expected to impact DNA or Mortuary operations, the OCME anticipates a delay in the turnaround time for nearly all other OCME services. **(See Page 38 for more details.)**

- **OCME – Attrition and PS Efficiencies.** The OCME would achieve savings through attrition and PS accruals of more than \$1 million in Fiscal 2011 and in the outyears. A total of 15 positions have been lost through attrition. **(See Page 38 for more details.)**
- **OCME – PS Furloughs.** The OCME would furlough staff in Fiscal Years 2012 and 2013, generating savings of over half a million dollars in Fiscal 2012 and around \$300,000 in Fiscal Years 2013 and 2014. **(See Page 38 for more details.)**

Administration – General

- **Agencywide Layoffs.** The Department proposes to achieve savings of \$477,000 in Fiscal 2011 and nearly \$2 million in Fiscal 2012 through layoffs of 30 staff. These layoffs would be conducted agencywide and would affect programs in Disease Control, Health Promotion & Disease Prevention, Environmental Health, Epidemiology and Health Care Access and Improvement. **(See Pages 19, 23, 26, 31 and 36 for more details.)**
- **Agencywide Program Reductions and Efficiencies.** The Department proposes to achieve savings of \$2.9 million in Fiscal 2011 and nearly \$5 million in Fiscal 2012 through a combination of staff attrition and program vacancies. These reductions would affect programs in Disease Control, Health Promotion & Disease Prevention, Environmental Health, Epidemiology and Health Care Access and Improvement. **(See Pages 19, 23, 27, 31 and 36 for more details.)**
- **PS Underspending and Efficiencies.** The Department identified savings of nearly \$4 million in Fiscal 2011 and nearly \$257,000 in Fiscal 2012. These savings would be absorbed in various program areas including General Administration, Disease Control, Epidemiology, Environmental Health, Health Care Access and Improvement and Mental Health Services. **(See Pages 14, 27, 32 and 43 for more details.)**
- **Central Administration Layoffs.** The Department proposes layoffs of eight staff in Central Administration and the Executive Office that would reduce spending by \$233,000 in Fiscal 2011 and \$701,000 in Fiscal 2012. These proposed layoffs are from the following Central Administration units/division: Facilities Planning and Management; Human Resources and Labor Relations; Communications; Take Care New York; and Intergovernmental Affairs. The Agency functions would be absorbed by remaining staff with no impact to direct services. **(See Page 43 for more details.)**
- **Central Administration PS Efficiencies.** Central Administration and the Executive Office would achieve PS efficiencies savings in the amount of \$474,000 in Fiscal 2011 and \$75,000 in Fiscal 2012 through accruals and attrition. Functions from attritted positions would be absorbed by remaining staff. **(See Page 43 for more details.)**

State Highlights

A number of proposed State Fiscal Year 2011-2012 Executive Budget actions would have an impact on the Department's public health portfolio, in particular. They are outlined below.

- **Elimination of General Public Health Work Optional Services.** The State Executive Budget proposes limiting Article 6 reimbursement for the General Public Health Work program to basic services. While the reimbursement rate would remain at 36 percent, reimbursement for all optional services would be discontinued. Based on the Department's current spending, the impact of these cuts on an annual basis totals \$23 million. Within the Department's scope of public health services, this State budget action is expected to impact dental health services and the Office of the Chief Medical Examiner. **(See Pages 32 and 39 for more details.)**

- **COPS funding for the Nurse Family Partnership (NFP).** Comprehensive Outpatient Program Services (COPS) funding for NFP has been folded into a new Primary Prevention Initiative, along with several other funding streams for foster care and juvenile delinquency reduction programs. However, the total funding of this initiative is only half of what those funding streams totaled in the last fiscal year. NFP would need to compete with other programs for funding within this initiative. Without \$4 million in COPS funding originally anticipated for Fiscal 2011, the Department faces a gap of approximately \$2.2 million in City tax levy. **(See Page 23 for more details.)**

- **State Medicaid Redesign.** In early CY 2011, Governor Cuomo nominated a team of 27 health care stakeholders, known as the Medicaid Redesign Team (MRT), to find ways to reduce costs in the amount of \$2.85 billion in the State's Medicaid program for the upcoming 2011-12 fiscal year and by \$4.6 billion for Fiscal Year 2012-2013. The Fiscal 2011-12 target has since been reduced to \$2.3 billion. Based on the MRT recommendations, the State Fiscal 2011-12 Executive Budget proposes approximately \$2.3 billion in reduced State Medicaid spending through a combination of (a) implementing across-the-board rate reductions, (b) eliminating statutory cost drivers (mainly, eliminating trend factor payments to health care institutions and health management organizations, which is an annual cost increase to reflect increased costs of providing care), (c) maximizing the value of federal funds, (d) implementing programmatic and structural reforms and (e) working with key stakeholders of the health care industry to devise other cost containment initiatives.
 - This redesign package is still in draft form as specific details regarding these actions are still being developed. Consequently, while DOHMH's budget for the current fiscal year and in the outyears would be significantly affected by State Medicaid cuts, impact estimates to the Department are currently unavailable and would likely become available for the upcoming Executive Budget Hearing Report on the Department of Health.

Department of Health and Mental Hygiene

The Department of Health and Mental Hygiene (DOHMH) protects and promotes the health and mental well being of all New Yorkers. The Department provides mental health services; mental retardation and developmental disability services; alcohol and drug use services; and Early Intervention services to developmentally delayed infants and toddlers. DOHMH's community-based services include: District Public Health Offices; five borough-based Early Intervention offices; four year round immunization walk-in clinics; nine TB/chest centers; nine STD clinics; HIV prevention and control services; health services at more than 1,250 schools; and health and mental hygiene services in the City's correctional facilities. DOHMH has programs to prevent and control chronic diseases such as heart disease, diabetes, asthma and cancer. The Department has also made reducing tobacco-related illnesses a priority. DOHMH generates community health profiles; issues birth and death certificates; conducts health and safety inspections to enforce the City Health Code; and protects public safety through immediate response to emergent public health threats.

Key Public Services Areas

- Promote health and mental hygiene, prevent and reduce alcohol and drug dependence, and reduce health disparities among New York City communities.
- Facilitate access to high-quality health and mental hygiene (mental health, developmental disabilities, and alcohol and drug use) services.
- Improve environmental health and safety.
- Provide high quality and timely services to the public.

Critical Objectives

- Reduce smoking and the illness and death caused by tobacco use.
- Improve overall health through scientific research and evidence-based initiatives.
- Prevent and control childhood diseases.
- Reduce new cases of HIV/AIDS, tuberculosis, sexually transmitted diseases and other preventable diseases.
- Facilitate access to quality mental health, Early Intervention, developmental disability, and alcohol and drug use services.
- Prevent lead poisoning.
- Promote the safety of child care programs.
- Promote the safety of commercial food establishments.
- Reduce rat infestation through inspection, notification and baiting.
- Reduce risks to human health from unwanted and abandoned animals.
- Provide birth and death certificates to the public quickly and efficiently.

SOURCE: Preliminary Mayor's Management Report

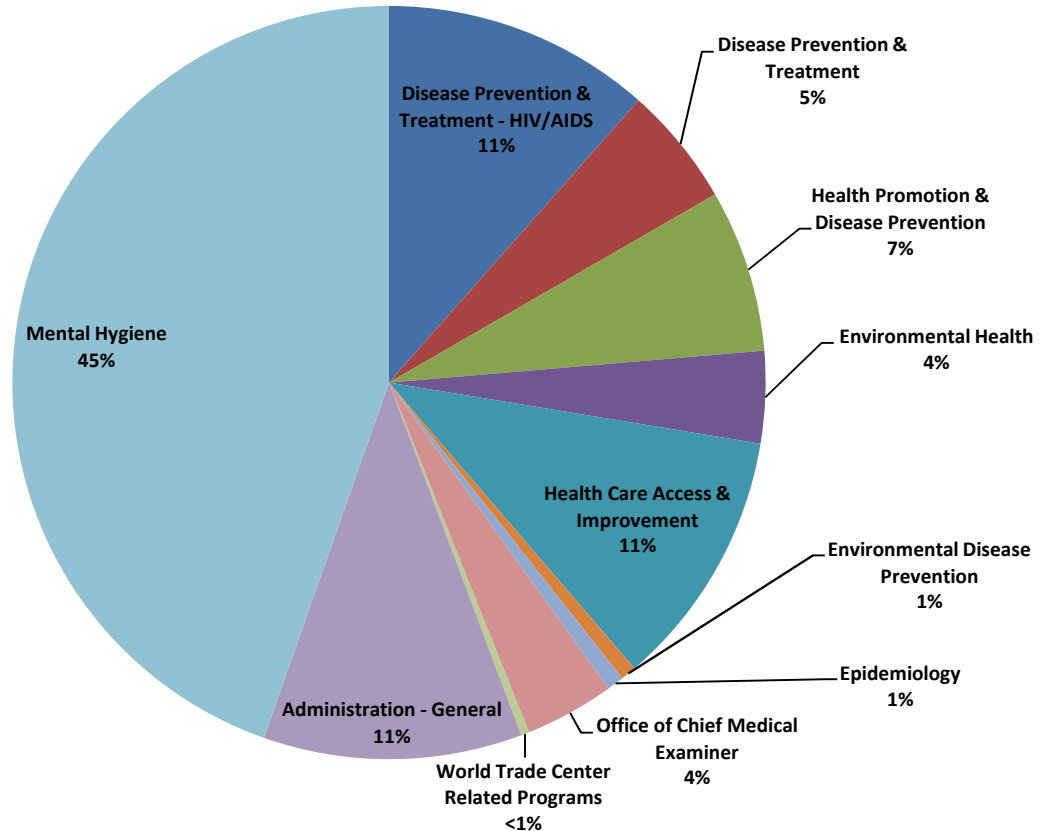
Department of Health and Mental Hygiene Financial Summary*Dollars in thousands*

	2009	2010	2011	2011	2012	Difference*
	Actual	Actual	Adopted	Feb Plan	Feb Plan	2012 vs. 2011
Budget by Program Area						
Disease Prevention & Treatment - HIV/AIDS	\$203,106	\$174,038	\$182,920	\$181,133	\$177,846	(\$5,073)
Disease Prevention & Treatment	82,180	83,632	82,823	102,667	79,347	(3,476)
Health Promotion & Disease Prevention	148,375	146,132	117,684	122,214	107,614	(10,071)
Environmental Health	58,882	59,009	62,570	61,054	60,948	(1,622)
Health Care Access & Improvement	181,736	178,862	171,431	186,378	171,508	77
Environmental Disease Prevention	10,920	11,175	10,653	10,212	10,210	(444)
Epidemiology	13,715	13,994	11,541	16,359	11,142	(399)
Office of Chief Medical Examiner	65,882	65,592	64,826	74,889	59,346	(5,480)
World Trade Center Related Programs	13,905	16,003	7,279	13,540	5,500	(1,779)
Administration - General	201,354	197,044	197,264	212,026	171,244	(26,020)
**Mental Hygiene	732,151	739,971	690,370	695,088	688,194	(2,176)
TOTAL	\$1,712,205	\$1,685,452	\$1,599,361	\$1,675,560	\$1,542,898	(\$56,463)
Funding						
City Funds	NA	NA	\$630,629	\$607,536	\$578,212	(\$52,416)
<i>Memo: Council Funds</i>	NA	NA	31,114	NA	NA	(31,114)
State	NA	NA	443,845	462,330	442,265	(1,581)
Federal - Other	NA	NA	262,538	329,542	257,527	(5,011)
Other Categorical	NA	NA	253,706	264,318	264,148	10,442
Intra-City	NA	NA	8,643	11,835	746	(7,897)
TOTAL	\$1,712,205	\$1,685,452	\$1,599,361	\$1,675,560	\$1,542,898	(\$56,463)

*The difference of Fiscal 2011 Adopted compared to Fiscal 2012 Preliminary Plan funding.

**Note: Details regarding mental hygiene for the Department are outlined in a separate report.

Fiscal 2012 DOHMH Budget by Program Area



Fiscal 2011 City Council Funding

City Council funding currently provides approximately \$31 million, or two percent, of the Department’s annual City-funds operating budget. This includes \$27 million in initiative funding (\$7 million for mental hygiene services and \$20 million for public health services) and Council Member items that total approximately \$4 million, which is funding for a combination of public and mental health services. Council funding plays an integral part in enhancing public health services throughout the City, and in some areas, restores funding to programs that have been reduced through budget cuts. In addition, all the public health initiatives are potentially eligible for State and/or federal match funding, increasing the overall impact of these funding dollars.

FY 2011 Council Changes at Adoption	
<i>Dollars in Thousands</i>	
Council Public Health Initiatives	
Asthma Control Program	\$500
Cancer Initiatives	1,365
Child Health Clinics	5,000
Family Planning	325
HIV AIDS-Communities of Color (Prevention & Education)	1,500
HIV Prevention and Health Literacy for Seniors	500
HIV/AIDS-Faith Based Initiative	1,500
Infant Mortality Reduction	3,000
Injection Drug Users Health Alliance (IDUHA)	1,200
NYU Dental Van	268
Obesity Intervention Programs	1,265
Pest Control PEG Restoration	1,000
Primary Care Initiative PEG Restoration	670
Rapid HIV Testing	2,000
Council Mental Hygiene Initiatives	7,132
Local Initiatives	3,889
TOTAL	\$31,114

Fiscal 2012 Preliminary Contracts Budget

The New York City Charter mandates the preparation of a Contract Budget to identify expenditures for contractual services, which are defined as any technical, consultant or personal service provided to the City by means of a contract. The Contract Budget is actually a subset of the Other Than Personal Services (OTPS) portion of the City's Expense Budget. The Administration prepares a Contract Budget twice each fiscal year. In January, it is prepared with the Departmental Estimates, and in late April it is submitted to the Council with the Executive Budget.

Category	Number	Budgeted	Pct of Agency Total	Pct of City Total
Contractual Services General	54	\$19,303,513	2.0%	3.8%
Telecommunications Maintenance	28	76,882	0.0%	0.2%
Maintenance and Repair & Motor Vehicle Equipment	18	256,304	0.0%	1.8%
Maintenance and Repair General	96	1,582,520	0.2%	1.6%
Office Equipment Maintenance	101	184,054	0.0%	1.3%
Data Processing Equipment	38	668,081	0.1%	0.5%
Printing Contracts	89	2,121,751	0.2%	6.4%
Security Services	3	151,077	0.0%	0.2%
Temporary Services	54	1,372,698	0.1%	3.8%
Cleaning Services	41	359,612	0.0%	1.8%
AIDS Services	45	133,370,778	14.0%	47.5%
Mental Hygiene Services	471	638,764,508	66.8%	100.0%
Hospitals Contracts	3	122,400,831	12.8%	99.8%
Special Clinical Services	1	7,158,741	0.7%	100.0%
Economic Development	11	331,815	0.0%	7.5%
Training Program City Employees	30	637,816	0.1%	4.5%
Maintenance & Operation of Infrastructure	81	632,654	0.1%	0.5%
Professional Services - Accounting and Auditing	3	1,144,991	0.1%	4.6%
Professional Services - Computer Services	12	2,343,891	0.2%	1.8%
Professional Services Other	134	22,877,762	2.4%	17.9%
Preliminary Budget	1,313	\$955,740,279	100.0%	N/A

Capital Program

Agency Overview

The Department of Health (DOH) assumes lead responsibility for enforcing the New York City Health Code and monitoring and improving public health. To achieve its mission, the Agency operates free district health clinics throughout the City, performs epidemiological investigations, provides for treatment of communicable diseases and monitors and ensures that the City's many community and commercial establishments are in compliance with environmental and health standards. In November 1994, DOH transferred the management of its child health, dental health, correctional health and community-care clinics to the Health and Hospitals Corporation but maintains contract oversight of the programs. The agency also performs the important function of publishing vital statistics on the City's health standards.

DOH's capital program goals include (a) ensuring DOH facility compliance with applicable codes, rules and regulations; (b) renovating DOH facilities requiring immediate repair and maintenance to ensure quality conditions within these facilities; (c) providing effective service delivery through investments in technology for DOH's automation systems and basic infrastructure; and (d) meeting legal mandates for animal care and control.

2011-2014 Commitment Plan: Adopted and Preliminary Budget

Dollars in Thousands

	FY11	FY12	FY13	FY14	Total
Adopted					
Total Capital Plan	\$109,067	\$10,988	\$29,667	\$9,278	\$159,000
Prelim					
Total Capital Plan	\$91,511	\$16,464	\$31,778	\$7,808	\$147,561
Change					
Level	(\$17,556)	\$5,476	\$2,111	(\$1,470)	(\$11,439)
Percentage	-16.10%	49.84%	7.12%	-15.84%	-7.19%

Capital Budget Summary

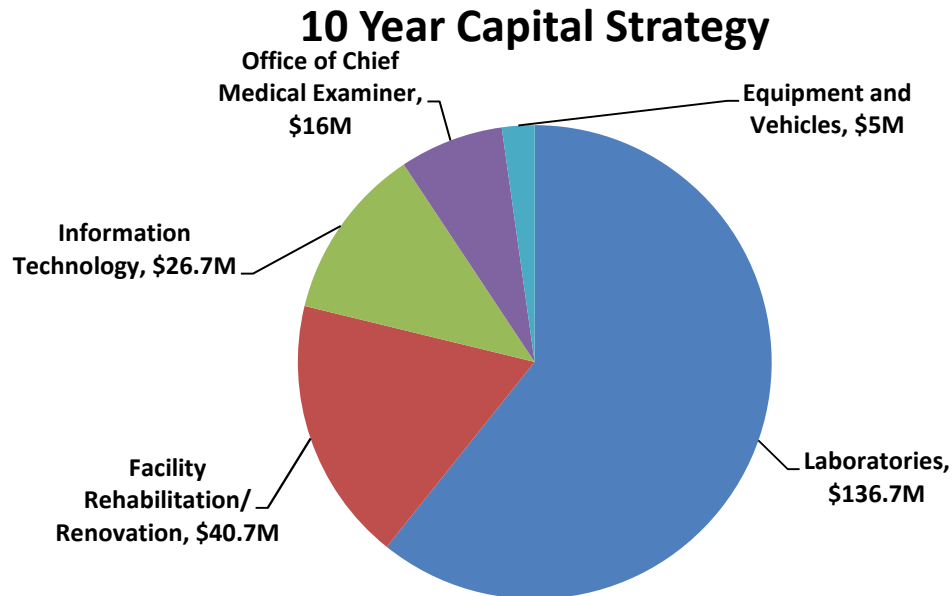
The February 2011 Capital Commitment Plan includes \$557.5 million in Fiscal 2011-2014 for the Department of Health and Mental Hygiene (including City and Non-City funds). This represents 1.7 percent of the City's total \$33.2 billion February Plan for Fiscal 2011-2014. The agency's February Commitment Plan for Fiscal 2011-2014 is 3.4 percent less than the \$557.5 million scheduled in the September Commitment Plan, a decrease of \$19.8 million.

Over the past five years (2006-2010) the Department of Health and Mental Hygiene has only committed an average of 25.8 percent of its annual Capital plan. Therefore, it is assumed that a portion of the agency's Fiscal 2011 Capital plan will be rolled into Fiscal 2012, thus increasing the size of the Fiscal 2012-2015 Capital plan. Since adoption last June, the Capital Commitment Plan for Fiscal 2011 has decreased from \$455 million to \$369 million, a reduction of \$87 million or 19 percent.

Currently, the Department of Health and Mental Hygiene appropriations total \$342 million in City funds for Fiscal 2011. These appropriations are to be used to finance the agency's \$464.4 million City-funded Fiscal

2011 Capital Commitment Program. The agency has \$122.4 million, or 26.4 percent, more funding than it needs to meet its entire Capital Commitment Program for the current fiscal year.

The Department's Ten-Year Capital Strategy includes a total of \$225.1 million in funding for:



Preliminary Ten-year Strategy

The Department's Preliminary Ten-Year Capital Strategy includes funds for:

- **Office of Chief Medical Examiner (OCME):** OCME investigates all deaths in New York City occurring from criminal violence, accident, suicide, sudden death or in any unusual or suspicious manner. OCME performs about 5,500 autopsies annually. \$16 million will fund OCME projects in FY2012-2021. Approximately \$4.3 million will go to constructing a new Bronx Mortuary on the NYC Health and Hospitals Corporation Jacobi Medical Center Campus.
- **Public Health Laboratory:** Established in 1892, the Public Health Laboratory provides a wide variety of clinical and environmental laboratory testing services. Currently, the Public Health Laboratory performs a total of over 2 million tests on the more than 400,000 specimens it receives each year. The agency will construct a new Public Health Laboratory (New Building) to replace the existing building on First Avenue with \$136.7 million in Fiscal 2012-2021. This lab is slated to be built at the Brooklyn Army Terminal.
- **Facility Rehabilitation and Renovation:** \$40.7 million is committed for the renovation of various City-owned public health facilities. The Preliminary Ten-Year Capital Strategy reflects a commitment to assessing, maintaining, and improving conditions throughout the agency's facilities portfolio.
- **Information Technology:** The agency has committed \$26.7 million to purchase technology to maintain and improve services.

Program Areas

Disease Prevention and Treatment-HIV/AIDS

The Bureau of HIV/AIDS performs HIV and AIDS surveillance, participates in community planning through the New York City HIV Prevention Planning Group and the HIV Planning Council and oversees contracts for HIV prevention, care and housing in New York City.

The proposed Fiscal 2012 program budget for HIV/AIDS Disease Prevention and Treatment is \$177.8 million which is \$5 million, or 2.8 percent, less than the Fiscal 2011 Adopted Budget. The Fiscal 2012 Preliminary Budget for HIV/AIDS prevention and treatment services represents 12 percent of the Department's overall proposed spending. The change in funding is attributed to a combination of spending reductions as well as federal grant adjustments needed to align the budget with grant award letters and Article VI adjustments to align the budget with State reimbursement law.

<i>Dollars in thousands</i>	2009 Actual	2010 Actual	2011 Adopted	2011 Feb. Plan	2012 Feb. Plan	Difference* 2012 vs. 2011
Spending						
Personal Services						
Full-Time Salaried - Civilian	\$18,961	\$19,227	\$21,917	\$20,148	\$21,917	\$0
Other Salaried & Unsalari ed	726	840	357	649	357	0
Overtime	246	309	205	338	205	0
Additional Gross Pay	704	821	238	859	238	0
Fringe	6	8	5	6	5	0
Subtotal, PS	\$20,643	\$21,205	\$22,722	\$21,999	\$22,722	\$0
Other than Personal Services						
Supplies and Materials	\$6,775	\$5,180	\$1,004	\$3,195	\$1,004	\$0
Property and Equipment	196	252	602	156	602	0
Other Services and Charges	2,989	3,509	9,704	1,990	4,746	(4,957)
Contractual Services	172,502	143,892	148,888	153,793	148,772	(116)
Subtotal, OTPS	\$182,463	\$152,833	\$160,198	\$159,134	\$155,125	(\$5,073)
TOTAL	\$203,105	\$174,038	\$182,920	\$181,133	\$177,846	(\$5,073)
Funding						
City Funds	NA	NA	14,003	5,617	11,156	(2,847)
State	NA	NA	7,723	3,263	5,497	(2,227)
Federal - Other	NA	NA	161,194	171,761	161,194	0
Other Categorical	NA	NA	0	439	0	0
Intra-City	NA	NA	0	53	0	0
TOTAL	\$203,105	\$174,038	\$182,920	\$181,133	\$177,846	(\$5,073)

*The difference of Fiscal 2011 Adopted compared to Fiscal 2012 Preliminary Plan funding.

Programmatic Overview

HIV/AIDS prevention and control remains a critical focus of the Department. Core HIV/AIDS prevention and control efforts include increasing HIV testing among New Yorkers, linking and keeping HIV/AIDS – patients-in-care and HIV/AIDS surveillance and program planning. The Department continues to expand upon existing programs to help more New Yorkers learn of their HIV status and also link individuals testing positive for HIV to care in a timely manner. The Department has also increased efforts to expand its condom distribution program. Since 2008, the Department and its numerous community partners have distributed approximately 130 million condoms throughout the five boroughs. The Department also focuses on keeping HIV-infected New Yorkers in care through direct outreach and contracted agencies. The Department continues to expand medical case management to improve medication compliance.

A large percentage of the Department's HIV/AIDS funding consists of Federal Ryan White funding. The Agency, in partnership with the Health and Human Services HIV Planning Council of New York, provides a full range of critical services to people living with HIV/AIDS. Services include treatment adherence support, supportive counseling and family support, legal services and medical services. These awards are selected through a competitive application process that considers, whenever possible, the geographic distribution of services, access to services by populations with special needs and locally based services in high-need communities. The awards are administered by Public Health Solutions on the City's behalf.

The Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (DHHS) estimates that more than half a million people nationally receive at least one medical, health, or related support service through Ryan White each year; many clients receive services from multiple parts of Ryan White. Most clients are low-income, with nearly three-quarters (68 percent) having annual household incomes at or below the poverty level, and most are uninsured (30 percent) or underinsured (56 percent). Clients are primarily male (although one-third of those served are women) between the ages of 25 and 44, and most are (self-identified) people of color (73 percent).

Fiscal 2012 Preliminary Budget Actions

- **Reduced pass-through funding to HHC for HIV/AIDS supportive services.** The Department proposes reducing its pass-through (intra-city) funding to HHC for HIV/AIDS supportive services by \$112,975 in Fiscal 2011 and \$186,994 in Fiscal 2012. Specifically, these reductions will be distributed among HHC's satellite and assessment services and its outpatient pharmacy.
- **Reduction to City Council Funding for Rapid HIV Testing.** The Department initially proposed a Fiscal 2011 reduction of \$108,000 to City Council HHC pass-through funding for rapid HIV. The total loss in spending would have been \$169,000 when accounting for the Article 6 State match. This reduction amount is proportionate to the Agency's overall Fiscal 2011 PEG target. After several rounds of negotiation with the Administration, the Council was able to fully restore this proposed cut.
- **PS Underspending and Efficiencies – Disease Prevention and Treatment, HIV/AIDS.** The Department identified one-time savings of \$1.6 million in Fiscal 2011 in PS accruals.

Council Initiatives and Funding

The Council provided funding for Fiscal 2011 for the following initiatives in the HIV/AIDS Disease Prevention and Treatment program area. As Council funding is renegotiated annually and allocated on a one-time basis, the following funding is not included in the Fiscal 2012 Preliminary Budget.

Disease Prevention and Treatment-HIV/AIDS	
<i>Dollars in Thousands</i>	
HIV/AIDS – Communities of Color (Prevention & Education)	\$1,500
HIV Prevention and Health Literacy for Seniors	500
HIV/AIDS – Faith-based Initiative	1,500
Injection Drug Users Health Alliance (IDUHA)	1,200
Rapid HIV Testing	2,000
Subtotal	\$6,700

The Council restored the following: \$1.5 million to address the disproportionate number of AIDS cases among communities of color and women; \$500,000 to develop tailored HIV prevention and educational messages that target the older adult population; \$1.5 million to local churches and community-based organizations that have demonstrated an ability to engage vulnerable populations raise awareness of the disease and thereby help lower the rate of HIV/AIDS; and \$1.2 million to combat the spread of HIV/AIDS passed through intravenous drug use.

The Council also provided \$2 million in funding to expand HHC's HIV rapid testing and counseling services on a routine basis at inpatient units and selected outpatient settings at public hospitals and clinics.

Performance Measures

	FY 08	FY 09	FY 10	FY 11 4-Month Actual	Target FY 12
Number of Male Condoms Distributed (000)	39,070	41,838	36,838	11,879	*
HIV tests conducted (preliminary)	201,636	268,971	276,685	NA	*
New adult AIDS cases diagnosed (CY) (preliminary)	3,388	3,124	2,969	NA	*
Persons diagnosed, living and reported with HIV/AIDS (CY)	102,906	105,633	108,883	NA	*
Number of New Yorkers who die from HIV/AIDS (CY)	1,115	1,073	933	NA	900
Unduplicated clients enrolled in HIV/AIDS (Ryan White) health and supportive services (FY March – February) (000)	64.7	88.0	90.9	NA	*

Many of the indicators listed above only depict minimal changes between Fiscal 2009 and Fiscal 2010; however, the differences reported between Fiscal 2008 and Fiscal 2009 illustrate much higher levels of overall change. The number of individuals tested for HIV increased by more than 37 percent since Fiscal 2008. Through initiatives such as "The Bronx Knows", which is a large-scale public health initiative to increase voluntary HIV testing to help inform Bronx residents of their HIV status and available care and prevention services, the Department is pursuing its goal of universal and routine screening for all at-risk individuals citywide.

The unduplicated number of clients enrolled in HIV/AIDS (Ryan White) health and supportive services grew nearly 41 percent since Fiscal 2008. Program growth can be attributed to technical assistance

provided by DOHMH to contracted organizations providing services to Ryan White clients, which increased adherence to targets outlined in the contracts.

From Calendar 2008 to Calendar 2009, there were fewer new diagnoses of adult AIDS cases and fewer deaths directly related to HIV/AIDS.

Disease Prevention and Treatment

The Department safeguards the health of New Yorkers through the identification, surveillance, treatment, control and prevention of infectious diseases and protects the health of citizens during emergencies.

The Disease Prevention and Treatment program budget for Fiscal 2012 is \$79.3 million, which is \$3.5 million, or 4.2 percent, less than the Fiscal 2011 Adopted Budget and represents five percent of total proposed Department spending for Fiscal 2012. The change in funding is attributed to a combination of reductions as well as federal grant adjustments needed to align the budget with grant award letters and Article VI adjustments to align the budget with State reimbursement law.

	2009	2010	2011	2011	2012	Difference*
<i>Dollars in thousands</i>	Actual	Actual	Adopted	Feb Plan	Feb Plan	2012 vs. 2011
Spending						
Personal Services						
Fulltime Salaried	\$51,004	\$52,247	\$58,296	\$66,219	\$55,681	(\$2,615)
Other Salaried & Unsalariated	7,547	7,569	5,747	7,323	5,451	(297)
Overtime	1,666	1,959	328	570	326	(2)
Additional Gross Pay	2,698	3,073	1,079	1,244	1,071	(8)
Fringe	236	362	44	284	44	(0)
Subtotal, PS	\$63,150	\$65,210	\$65,496	\$75,641	\$62,573	(\$2,923)
Other than Personal Services						
Supplies and Materials	\$6,087	\$6,083	\$6,334	\$4,594	\$5,840	(\$494)
Fixed and Misc Charges	0	0	0	15	0	0
Social Services	511	144	67	118	67	0
Property and Equipment	1,231	1,827	829	1,624	828	(1)
Other Services and Charges	3,320	3,265	6,897	5,183	6,880	(17)
Contractual Services	7,880	7,104	3,200	15,491	3,158	(42)
Subtotal, OTPS	\$19,030	\$18,422	\$17,327	\$27,026	\$16,773	(\$554)
TOTAL	\$82,180	\$83,632	\$82,823	\$102,667	\$79,347	(\$3,476)
Funding						
City Funds	NA	NA	\$22,130	\$19,259	\$18,548	(\$3,582)
State	NA	NA	8,015	10,530	9,711	1,696
Federal - Other	NA	NA	47,650	68,042	47,559	(90)
Other Categorical	NA	NA	4,473	4,616	3,473	(1,000)
Intra-City	NA	NA	555	219	55	(499)
TOTAL	\$82,180	\$83,632	\$82,823	\$102,667	\$79,347	(\$3,476)

*The difference of Fiscal 2011 Adopted compared to Fiscal 2012 Preliminary Plan funding.

Programmatic Review

Sexually Transmitted Diseases

Sexually Transmitted Disease Control (STDC) provides testing and treatment services to curtail the spread of infections, supports outreach activities and targeted screening through community-based organizations, conducts provider training and sponsors a partner self-notification website. In addition to the Department's strategies to address syphilis (condom distribution, provider training, community outreach and educational campaigns), the DOH is working closely with health care providers reporting the greatest number of new syphilis cases in NYC. The Department's sexually transmitted disease clinics are now offering substance abuse screening, counseling, intervention, and referral for more intensive services to address the role that substance abuse plays in risky sexual behavior.

Tuberculosis

The Bureau of Tuberculosis Control provides direct patient care, education, surveillance and outreach to reduce the incidence of Tuberculosis (TB). In calendar year 2009, new cases of TB reached a new historic low of 760 cases. TB continues to disproportionately affect the foreign-born, and the Department continues services for high-risk immigrant communities and completion rates for treatment of dormant TB infections. The Department also works with medical providers and local hospitals, community boards and community-based organizations to raise awareness and reduce the spread of disease in neighborhoods where TB cases are increasing.

Immunizations

The Bureau of Immunization's mission is to prevent the occurrence and transmission of diseases through immunization. The Bureau promotes the immunization of children and adults against Hepatitis B, Measles, Mumps and Rubella, Varicella, Diphtheria, Tetanus, Pertussis, *Haemophilus Influenzae* Type B, Polio, Influenza and Pneumococcal disease.

Laboratories

The Public Health Laboratory provides state-of-the-art laboratory services to identify and investigate infectious diseases, including rapid testing for bioterrorist agents. The Laboratory performs tests for conditions such as rabies, West Nile virus, and certain environmental exposures not offered by commercial laboratories. It is also the City's largest HIV testing laboratory.

Fiscal 2012 Preliminary Budget Actions

- **Reductions to Public Health Lab Testing.** The Department is proposing to eliminate several ancillary tests from its overall testing portfolio: (a) testing of compounds in drinking water; (b) blood lead testing for children and NYPD firing range staff; and (c) all parasitology, toxicology and drug testing. These tests are not part of the core set of tests administered by the Department. Testing for these items is available through other vendors and would be outsourced. Four positions would be lost due to attrition. Total estimated reduced spending on Public Health Labs is estimated at \$164,000 for Fiscal 2011 and \$259,000 for Fiscal 2012.
- **Public Health Labs Layoffs.** The Department proposes layoffs of 11 staff in response to the proposed reductions and/or eliminations in Public Health Lab testing, which would reduce spending by \$225,000 for Fiscal 2011 and \$857,000 for Fiscal 2012.
- **TB Direct Clinical Care.** The Department proposes to eliminate two of its seven TB clinic locations, one in Chelsea and one in Bedford. In addition to these closures, the Department proposes reduced hours of operation for the remaining five clinics. These clinics would operate from 8:30am to 5:00 pm Monday through Friday. Additionally, the Morrisania clinic would remain open one Saturday per month from 8:30am to 4:30pm and its Corona clinic would continue to operate extended hours (every Saturday from 8:30am to 4:30 pm and until 8:00pm on Mondays and Thursdays). Total estimated savings through these reductions in direct TB clinical care are estimated at \$166,000 in Fiscal 2011 and \$494,000 in Fiscal 2012.
- **TB Direct Clinical Care Layoffs.** The Department proposes reducing personal service-related spending for TB Direct Clinical Care by eliminating 13 positions via layoffs. Savings achieved through these layoffs are estimated to be \$216,000 in Fiscal 2011 and \$914,000 in Fiscal 2012. These layoffs are attributed to the closure of two TB clinics described above.
- **Agencywide Layoffs – Disease Prevention and Treatment.** The Department proposes to achieve savings of \$12,000 in Fiscal 2011 and \$91,000 in Fiscal 2012 in total spending through one staff layoff. This layoff would affect secretarial, data entry and general clerical functions within the Bureau of Communicable Diseases. The Department estimates that a layoff in this program area would have the least impact on public health functions. Tasks would be distributed among the remaining staff.
- **Agencywide Program Reductions and Efficiencies – Disease Prevention and Treatment.** The Department proposes to achieve savings of \$314,000 in Fiscal 2011 and \$1 million in Fiscal 2012 in total spending through a combination of staff attrition and program vacancies. Two full-time positions would be lost through attrition and three full-time positions would be eliminated through funding shifts (one part-time and two full-time positions would be shifted from CTL to grant funding). The following functions would be affected:
 - Bureau of Communicable Diseases. Communicable disease surveillance and response activities, including complete elimination of the unit that focused on antibiotic resistance issues, such as methicillin resistant Staphylococcus aureus (MRSA) infection. Some surveillance functions would have to be cut back, causing the Bureau to have reduced capacity to effectively recognize and respond to acute case and outbreak investigation involving antibiotic resistant pathogens.

- Bureau of STD Prevention & Control. Provision of clinical services at STD clinics, extending patient waiting time in the clinics and causing delays in the Bureau's ability to treat some infected patients.
- Bureau of Immunization. The Department would reduce the purchase of flu vaccines and scale back various contracts that provide support and maintenance to its various internal IT systems.

Performance Measures

	FY 08	FY 09	FY 10	FY 11 4-Month Actual	Target FY 12
Syphilis cases	956	1,075	978	333	*
New tuberculosis cases (CY) (preliminary)	914	895	760	237	*
Patients who complete treatment for active tuberculosis (%) (CY)	92.0%	94.0%	90.5%	90.3%	94.0%
Children in the public schools who have completed required immunizations (%)	97.9%	98.8%	98.8%	91.8%	98.8%
Seniors aged 65+, who received a flu shot in the last 12 months (%) (CY)	54.7%	56.6%	52.6%	NA	64.0%

The number of syphilis cases reported during the first four months of Fiscal 2011 decreased by 12 percent.

The number of new tuberculosis cases decreased 15 percent from Calendar 2008 to Calendar 2009. The Bureau is collaborating with the US Centers for Disease Control (CDC) to investigate this phenomenon.

The number of patients completing treatment for active tuberculosis has gone down by 3.5 percentage points.

Nearly all children in NYC public schools have completed their required immunizations, holding steady at 98.8 percent from the last fiscal year.

The percentage of seniors aged 65 and over who reported receiving a flu shot during Calendar 2009 was 11.4 percentage points below the target of 64 percent.

Health Promotion and Disease Prevention

The Department, through its Division of Health Promotion and Disease Prevention, seeks to reduce health disparities among communities by directing its most intensive efforts to communities with the greatest needs.

The Health Promotion and Disease Prevention budget for Fiscal 2012 is \$106.7 million which is \$10.1 million, or 8.6 percent, less than the Fiscal 2012 Adopted Budget. The Fiscal 2012 Preliminary Budget for Health Promotion and Disease Prevention comprises seven percent of total proposed Department spending for Fiscal 2012. The change in funding from the Fiscal 2011 Adopted Budget to the Fiscal 2012 Preliminary Budget can be largely attributed to reductions to City funding (including intra-cities) in order to help close the City's budget gap. The reduction in City funding is slightly offset by other incoming categorical revenue, federal grant award adjustments to align the budget with grant award letters and Article VI adjustments to align the budget with State reimbursement law.

<i>Dollars in thousands</i>	2009 Actual	2010 Actual	2011 Adopted	2011 Feb Plan	2012 Feb Plan	Difference* 2012 vs. 2011
Spending						
Personal Services						
Fulltime Salaried	\$31,555	\$32,888	\$23,391	\$23,606	\$21,560	(\$1,831)
Other Salaried & Unsalariated	47,754	49,489	49,476	49,875	49,071	(406)
Overtime	310	1,293	166	166	166	0
Additional Gross Pay	10,970	9,065	3,399	3,401	3,399	0
Fringe	473	518	103	103	103	0
Subtotal, PS	\$91,062	\$93,254	\$76,535	\$77,151	\$74,298	(\$2,236)
Other than Personal Services						
Supplies and Materials	\$2,396	\$1,305	\$3,324	\$1,176	\$2,921	(\$403)
Property and Equipment	843	415	268	348	268	0
Other Services and Charges	23,472	32,985	19,020	22,637	15,661	(3,359)
Contractual Services	30,601	18,173	18,537	20,901	14,465	(4,072)
Subtotal, OTPS	\$57,313	\$52,878	\$41,150	\$45,063	\$33,315	(\$7,835)
TOTAL	\$148,375	\$146,132	\$117,684	\$122,214	\$107,614	(\$10,071)
Funding						
City Funds	NA	NA	\$66,831	\$59,339	\$57,357	(\$9,474)
State	NA	NA	33,330	35,199	32,394	(936)
Federal - Other	NA	NA	700	3,924	550	(150)
Other Categorical	NA	NA	10,101	17,030	17,312	7,211
Intra-City	NA	NA	6,722	6,722	0	(6,722)
TOTAL	\$148,375	\$146,132	\$117,684	\$122,214	\$107,614	(\$10,071)

*The difference of Fiscal 2011 Adopted compared to Fiscal 2012 Preliminary Plan funding.

Programmatic Review

School Health

The Office of School Health promotes the physical, emotional, social and environmental health of schoolchildren in public and non-public schools. Services include counseling, health education and case management that focuses on identifying health problems and making referrals for ongoing treatment. The Office of School Health works with the Department of Education (DOE) to develop nutrition guidelines and improve compliance with immunizations standards.

Tobacco

The Department continues its efforts to educate smokers about the dangers of smoking, motivate them to quit through multi-media campaigns and distribute nicotine replacement therapy. The Department recently launched a new educational campaign to alert consumers to a deceptive marketing technique the tobacco industry is using to evade the federal ban on package labels such as “light,” “low-tar” and “mild.”

Chronic Disease

Chronic diseases are responsible for the vast majority of deaths and hospitalizations among New Yorkers and also contribute significantly to a diminished quality of life. Improving nutrition and physical activity levels are critical to reducing the occurrence of many chronic diseases such as heart disease, stroke, cancer, diabetes and respiratory diseases. The Department has worked to increase access to fruits, vegetables and other healthy foods in target areas throughout the City through its “Health Bodegas” initiative and by issuing additional “Green Cart” mobile vending licenses. Additional related efforts include (a) increasing physical activity among young children, (b) enhancing screening, prevention and care for diabetes, colon and breast cancer, heart disease and asthma and (c) promoting physical activity through improvements to the City’s physical environment.

Maternal and Child

The Bureau of Mother, Infant and Reproductive Health plays a vital role in decreasing the disparities that challenge women and men in the areas of sexual reproductive, perinatal and infant health. The Bureau’s programs include the Nurse Family Partnership, which is a national nurse home visiting program for low-income, first-time mothers, their infants and families, and the Newborn Home Visiting Program, which is a collaboration between the district public health offices (DPHOs) and the Bureau of Mother, Infant and Reproductive Health. The program targets the DPHO neighborhoods of Bedford-Stuyvesant, Brownsville, Bushwick, East Harlem, Central Harlem and the South Bronx. In these communities, a health worker visits with new mothers to help create a safe and nurturing home for the infants.

Fiscal 2012 Preliminary Budget Actions

- **Funding Shift in School Health Revenue.** The Department would realize savings to the City in the amount of \$6.4 million in Fiscal 2011 and \$8.2 million in Fiscal 2012 through claiming additional Medicaid for School Health Early Periodic Screening and Diagnostic Treatment (EPSDT) reimbursement. The Department revised its time allocation methodology along with the growth of the program, yielding a baseline increase in EPSDT revenue. This new method would enable school health nurses to be eligible for more activities.
- **Agencywide Layoffs – Health Promotion and Disease Prevention.** The Department proposes to achieve savings of \$158,000 in Fiscal 2011 and \$603,000 in Fiscal 2012 in total spending through layoffs of seven staff. These layoffs would impact administrative tasks and programmatic responsibilities. Administrative tasks would be absorbed by existing staff. The following programmatic responsibilities would be affected:
 - Reductions in asthma intervention, active design efforts, hypertension reduction, gestational diabetes, public health detailing, and a program to expand access to low cost pharmaceuticals (NYCRx)
 - Reductions in the Bureau of Maternal, Infant, and Reproductive Health.
 - Reductions in the District Public Health Offices including: (a) the Bronx DPHO would delay launching a new teen pregnancy; (b) the Brooklyn DPHO would reduce its efforts in organizing, promoting and planning various community-based events and (c) the East Harlem DPHO would be less responsive to asthma services requests from the public, and would eliminate some services it currently provides to families of children with persistent asthma. This office would also reduce administrative costs and incentives to families.
- **Agencywide Program Reductions and Efficiencies – Health Promotion and Disease Prevention.** The Department proposes to achieve savings of \$412,000 in Fiscal 2011 and over \$1 million in Fiscal 2012 in total spending through a combination of staff attrition and program vacancies. One full-time position would be lost through attrition, ten full-time positions would be shifted through redeployment and would be two vacancy reductions.
- **Nurse Family Partnership CTL Match.** The Department is proposing a new need in the amount of \$1 million in Fiscal 2012 and \$2 million in Fiscal 2013 and in the outyears. This additional funding reflects the CTL match required for federal funds and the intra-city transfer to the Administration of Children’s Services (ACS).

State Budget Actions

- **COPS funding for the Nurse Family Partnership (NFP).** COPS funding for NFP has been folded into a new Primary Prevention Initiative, along with several other funding streams for foster care and juvenile delinquency reduction programs. However, the total funding of this initiative is only half of what those funding totaled in the last fiscal year. NFP would need to compete with other programs for funding within this initiative. Without \$4 million in COPS funding originally anticipated for Fiscal 2011, the Department faces a gap of approximately \$2.2 million in City tax levy funding.

Council Initiatives and Funding

The Council provided funding for the following initiatives in the Health Promotion and Disease Prevention program area for Fiscal 2011. As Council funding is renegotiated annually and allocated on a one-time basis, the following funding is not included in the Fiscal 2012 Preliminary Budget.

Health Promotion and Disease Prevention	
<i>Dollars in Thousands</i>	
Asthma Control Program	\$500
Cancer Initiatives	1,365
Family Planning	325
Infant Mortality Reduction Initiative	3,000
Obesity Intervention Program	1,265
Subtotal	\$6,455

The Council restored (a) \$500,000 to the Department to continue its integrated pest management program and asthma screening and prevention programs at school sites, (b) \$1.4 million for various screening and education for breast, colon and ovarian cancer, (c) \$325,000 to Planned Parenthood for health and pregnancy prevention services for uninsured and high-risk teens, (d) \$3 million for interventions targeting community districts with high infant mortality rates and communities demonstrating racial and ethnic disparities in infant mortality rates and (e) \$1.3 million to a number of obesity prevention programs which provide education and physical fitness to curb and prevent obesity.

Performance Measures

	FY 08	FY 09	FY 10	FY 11 4-Month Actual	Target FY 12
Adults who smoke (%) (CY)	16.9%	15.8%	15.8%	NA	13.2%
Adults aged 50+, who received a colonoscopy in the past ten years (%) (CY)	61.7%	65.6%	66.0%	NA	76.0%
Adults who consume an average of one or more sugar-sweetened beverage per day (%) (CY)	35.9%	32.6%	31.6%	NA	*
Screening rates for breast cancer (CY)	73.9%	77.8%	78.5%	NA	79.5%
Screening rates for cervical cancer (CY)	79.8%	82.5%	81.6%	NA	83.0%
Hospitalization rate for asthma among children ages 0-14 (per 1,000 children) (CY) (preliminary)	5.2	5.2	4.9	NA	4.7
Infant mortality rate (per 1,000 live births) (CY)	5.4	5.5	5.3	NA	5.1

The adult smoking rate remained unchanged at 15.8 percent in Calendar 2009, remaining the lowest rate ever recorded in NYC. The reduction since 2007 was particularly notable among smokers at the lowest income level, from 20.8 percent to 15.5 percent.

The infant mortality rate fell to 5.3 in Calendar 2009, the lowest rate recorded in over 100 years of measurement.

Environmental Health

The Department conducts surveillance of environmental-related disease, assesses risk from exposure to potential environmental and occupational hazards, inspects child care facilities, food service establishments and other permitted entities to ensure compliance with regulations, response to complaints of environmental and occupational exposures, and educated the public and health care providers on environmental and occupational illnesses.

The Environmental Health budget for Fiscal 2012 is \$61 million, which is \$1.8 million, or 2.6 percent, less than the Fiscal 2011 Adopted Budget and represents less than four percent of total proposed Department spending for Fiscal 2012. The change in funding is attributed to a combination of reductions to City funding in order to close the City's budget gap and increased revenue from restaurant inspections as well as grant award adjustments and Article VI adjustments at the State level.

<i>Dollars in thousands</i>	2009 Actual	2010 Actual	2011 Adopted	2011 Feb Plan	2012 Feb Plan	Difference* 2012 vs. 2011
Spending						
Personal Services						
Fulltime Salaried	\$35,696	\$37,917	\$43,821	\$41,079	\$42,255	(\$1,566)
Other Salaried & Unsalariated	1,751	1,852	1,124	1,258	851	(273)
Overtime	1,187	1,114	738	772	745	7
Additional Gross Pay	2,410	2,688	1,185	1,215	1,202	17
Fringe	2	2	0	0	0	0
Amounts to be Scheduled & Other	0	0	409	409	409	0
Subtotal, PS	\$41,046	\$43,572	\$47,276	\$44,734	\$45,462	(\$1,815)
Other than Personal Services						
Supplies and Materials	\$1,697	\$781	\$877	\$711	\$792	(\$85)
Property and Equipment	584	462	248	638	183	(65)
Other Services and Charges	3,328	2,889	3,677	3,609	3,732	55
Contractual Services	12,226	11,306	10,491	11,361	10,779	288
Subtotal, OTPS	\$17,836	\$15,437	\$15,293	\$16,320	\$15,486	\$193
TOTAL	\$58,882	\$59,009	\$62,570	\$61,054	\$60,948	(\$1,622)
Funding						
City Funds	NA	NA	\$47,025	\$44,736	\$45,414	(\$1,611)
State	NA	NA	5,524	4,368	5,319	(205)
Federal - Other	NA	NA	9,605	9,731	9,605	0
Other Categorical	NA	NA	416	661	610	194
Intra-City	NA	NA	0	1,556	0	0
TOTAL	\$58,882	\$59,009	\$62,570	\$61,054	\$60,948	(\$1,622)

*The difference of Fiscal 2011 Adopted compared to Fiscal 2012 Preliminary Plan funding.

Programmatic Review

Animal Control

Animal Care and Control (AC&C) services are contracted to the Center for Animal Care and Control (CACC), rather than being performed directly by the Department. The scope of the services provided through this contract includes animal pick-up, shelter services, adoption, humane euthanasia and preparation of animals for rabies testing.

Food Safety

The Bureau of Food Safety and Community Sanitation conducts inspections of food services establishments (FSEs), mobile food vending operations, senior centers, public schools, day camps, correctional facilities, single-room occupancy hotels, and window guard installations in multiple family dwellings.

Pest Control Services

The Department's Pest Control Services (PCS) program works to reduce the presence of rats in New York City. PCS operates out of six regional offices in the five boroughs. PCS responds to complaints about rats, conducts inspections, and may apply rat bait (rodenticide) or clean up properties when owners fail to act. As part of an overall integrated pest management approach, PCS works with 19 other agencies to coordinate the City's response to rats in New York City.

In December 2007, the Department started a new program to control rats in the Bronx. This program uses an inspectional process called "Rat Indexing" to proactively identify the presence of rats in neighborhoods, and to compare the severity of infestations among blocks and neighborhoods. This program also provides more detailed inspection findings and advice to property owners on how to correct conditions.

Fiscal 2012 Preliminary Budget Actions

- **Reductions in Pass-Through Funding.** The Department proposes to reduce its intra-city funding to the Department of Housing Preservation and Development (HPD) and to the Department of Environmental Protection (DEP) by a total of \$59,000 starting in Fiscal 2011 and through the outyears. These reductions are proportional to the DOH's required savings target for both Fiscal Years. These reductions would impact (a) healthy homes awareness training, resulting in fewer in-person training and outreach events and (b) training and equipment acquired by the DEP to support Hazmat staff.
- **Agencywide Layoffs - Environmental Health.** The Department proposes to achieve savings of \$255,000 in Fiscal 2011 and over \$1 million in Fiscal 2012 in total spending through layoffs of 19 staff. These layoffs would affect clerical and administrative functions for Pest Control Services and EH Central Administration, as well as certain field, educational and administrative staff for the Window Guard Program. The Department expects that the transfer of the Window Guard Inspectional process from DOHMH to HPD would provide for better integration of the inspectional and remediation process. DOHMH would continue to conduct outreach and education and forward any window complaint information to HPD when necessary. However, these layoffs may lead to occasional backlogs in data entry while seasonal programs are in operations.

- **Agencywide Program Reductions and Efficiencies – Environmental Health.** The Department proposes to achieve savings of \$777,000 in Fiscal 2011 and \$1.6 million in Fiscal 2012 in total spending through a combination of staff attrition and program vacancies. One full-time position would be lost through attrition, 12 full-time positions would be lost through funding shifts and eight full-time positions would be eliminated through vacancy reductions. These vacancies would affect Lead Prevention Case Management support, Child Care registration and inspections for State program, analysis and research and on-site regulatory quality assurance field inspections. The bureaus would identify efficiencies through redistribution of work and reducing redundancies.
 - With regard to Child Care, Child Care would move from a two-year permit to a four year permit. Staff responsible for inspecting City-regulated centers would be shifted to state grants, displacing 12-15 registration and/or field inspection staff. This would result in a reduction in the scope of Early Childhood Education consultant visits, but their inspection role in evaluating safety, criminal clearance and staff qualifications would be preserved. In addition, the Department’s field inspections would be reduced by the displacement of field staff
- **PS Underspending and Efficiencies – Environmental Health.** The Department identified a one-time savings of \$622,000 in Fiscal 2011 in PS accruals.
- **New Need – DOHMH License Processing.** The Department estimates it would generate \$511,000 in additional revenue starting in Fiscal 2011 and through the outyears. This amount is expected to offset the Department of Consumer Affairs’ License processing expenses.

Council Initiatives and Funding

The Council provided funding for the following initiative in the Environmental Health program area for Fiscal 2011. As Council funding is renegotiated annually and allocated on a one-time basis, the following funding is not included in the Fiscal 2012 Preliminary Budget.

Environmental Health	
<i>Dollars in Thousands</i>	
Pest Control PEG Restoration	\$1,000

The Council restored \$1 million to a proposed cut to the Department’s Pest Control program. \$500,000 of the restoration enabled the Department to rehire 27 workers for a period of six months in Fiscal 2011 only to address pest infestations in City parks. The remaining \$500,000 was designated for the development of guidelines and protocols for bed bugs awareness, prevention and abatement (mainly, the development of a web-based bed bug portal).

Performance Measures

	FY 08	FY 09	FY 10	FY 11 4-Month Actual	Target FY 12
Restaurants inspected (%)	80.1%	99.1%	99.7%	37.2%	100%
Food Service Establishments scoring 28 or more points on initial inspection ('C' grade equivalent)	25.6%	24.3%	21.0%	27.5%	*
Day Care site complaints received	1,554	1,525	1,425	543	*
Day Care Initial site inspections	18,695	15,989	20,280	7,130	*
Pest control complaints received by DOHMH (000)	23.0	22.1	21.8	9.2	*
Initial Pest Control Inspections (000)	72	89	85	38	*
Initial Inspections with Active Rat Signs (ARS) (%)	22.3%	13.1%	15.1%	9.6%	*
Compliance inspections found to be rat free (%)	42.2%	40.8%	43.5%	45.6%	*
Dog Licenses Issued (000)	91.8	101.0	99.4	35.2	105.0

The number of day care initial site inspections increased 16.4 percent above Fiscal 2010 levels. This is due in part to increasing use of a handheld inspectional system for state regulated programs, which has resulted in increased productivity by allowing field staff to spend more of their time in the field.

During the first four months of Fiscal 2011, the proportion of food service establishments scoring 28 or more points on initial inspection ('C' grade equivalent) increased by 7.8 percentage points from the same period last year, to 27.5 percent from 19.7 percent. During the first four months of Fiscal 2011, the proportion of restaurants inspected declined, but performance is consistent with reporting periods prior to Fiscal 2010.

Pest control initial inspections increased 65 percent in the first four months of Fiscal 2011 to approximately 38,000, compared to 23,000 during the first four months of Fiscal 2010. In the past year, the Department's indexing initiative has expanded from the Bronx to also include Manhattan. The Department's indexing initiative includes regular proactive inspections of selected geographic areas for Active Rat Signs (ARS) that are performed on all properties within specific high-need community districts. Index inspections target the highest need areas for regular inspections and re-inspections. More inspectors have been trained in indexing to account for the expansion.

Initial pest control inspections with signs of active rats declined by nearly 10 percentage points to 9.6 percent and compliance pest control inspection found to be rat free improved by 11 percentage points compared to the same period last year. The Department focused on properties with repeat failures in the Bronx in the first four months of Fiscal 2010 while Manhattan properties were indexed for the first time during the first four months of Fiscal 2011.

Health Care Access and Improvement

The Department develops, implements, and monitors programs to expand the availability of health services for all New Yorkers. As of March 2011, 2 million New Yorkers were enrolled in Medicaid managed care programs, including special needs populations. The Department would continue to collaborate with managed care plans to address public health priorities through improved health care management and effective prevention activities, including the promotion of the importance of dental care and increased utilization of dental services by enrolled children.

The Health Care Access and Improvement budget for Fiscal 2012 is \$171.5 million which is \$1.5 million less than the Fiscal 2011 Adopted Budget and represents 11 percent in total proposed Department spending for Fiscal 2012. Reductions to City spending in order to close the City's budget gap have been completely offset by an increase in state funding. The change in funding is also attributed to federal grant award adjustments to align the budget closely with grant award letters and Article VI adjustments to align the budget with State reimbursement law.

<i>Dollars in thousands</i>	2009 Actual	2010 Actual	2011 Adopted	2011 Feb Plan	2012 Feb Plan	Difference* 2012 vs. 2011
Spending						
Personal Services						
Fulltime Salaried	\$15,848	\$14,780	\$8,874	\$17,208	\$10,142	\$1,268
Other Salaried & Unsalariated	3,238	1,754	776	1,569	1,022	245
Overtime	62	208	54	79	54	0
Additional Gross Pay	575	546	468	685	498	30
Fringe	11	2	13	14	13	0
Subtotal, PS	\$19,734	\$17,290	\$10,185	\$19,555	\$11,729	\$1,544
Other than Personal Services						
Supplies and Materials	\$247	\$208	\$722	\$524	\$470	(\$251)
Social Services	800	800	566	400	400	(166)
Property and Equipment	581	283	62	386	102	39
Other Services and Charges	33,071	33,147	30,144	35,404	30,416	272
Contractual Services	127,304	127,134	129,752	130,110	128,391	(1,360)
Subtotal, OTPS	\$162,002	\$161,572	\$161,246	\$166,823	\$159,779	(\$1,467)
TOTAL	\$181,736	\$178,862	\$171,431	\$186,378	\$171,508	\$77
Funding						
City Funds	NA	NA	\$149,901	\$149,984	\$147,022	(\$2,879)
State	NA	NA	19,163	28,996	22,676	3,512
Federal - Other	NA	NA	1,192	5,564	1,310	118
Other Categorical	NA	NA	0	1,334	0	0
Intra-City	NA	NA	1,175	500	500	(675)
TOTAL	\$181,736	\$178,862	\$171,431	\$186,378	\$171,508	\$77

*The difference of Fiscal 2011 Adopted compared to Fiscal 2012 Preliminary Plan funding.

Programmatic Review

Insurance

Health Insurance Services enrolls families into health insurance (such as Children's Medicaid, Child Health Plus, Family Health Plus, Medicaid and the Prenatal Care Assistance Program); works to improve the quality of health care offered through Medicaid managed care organizations, and promotes appropriate health care utilization and preventive health behaviors.

Oral Health

The Bureau of Oral Health promotes the oral health of New York City residents through the prevention and control of oral diseases. To expand its reach, the Bureau partners with academic institutions, private corporations and dental organizations. Services are available to children and adolescents at a network of clinics in health centers and community sites such as schools.

All Department Oral Health Program (OHP) services ended as September 1, 2009. The Oral Health program had provided dental service at 48 sites (30 full service school sites and 18 sealant-only sites) and had employed 57 full-time and 35 part-time staff to staff these sites.

Closures were mitigated by transitioning patients. Oral health care for children was made available from other community providers including federally qualified health centers (FQHCs) at DOHMH clinic sites and in schools. In fact, FQHCs get a higher reimbursement rate than the City does for dental services, which means more primary care dollars coming into the City.

Primary Care Information Project (PCIP)

The Primary Care Information Project supports the adoption and use of prevention-oriented electronic health records (EHRs) among primary care providers in New York City's underserved communities. Funded by \$60 million in city, state, federal and private funds, PCIP aims to improve the health of New Yorkers by supporting the adoption and use of EHRs among the city's primary care providers. The project focuses on the New York neighborhoods where health disparities are greatest – East and Central Harlem, the South Bronx, and Central Brooklyn.

In 2010, PCIP established NYC REACH, a federally designated Regional Extension Center, to assist providers with choosing, adopting, and using an EHR to improve their patients' health.

Prison Health

The Bureau of Correctional Health Services (CHS) is responsible medical, mental health, dental, discharge planning, and transitional health care services in the City's correctional facilities, which have over 100,000 admissions per year and house roughly 13,500 inmates and detainees on a given day.

CHS provides health care on a 24 hour a day, seven days a week basis. This is accomplished through the direct provision of care, as well as, through contracted provider services. Medical intake screenings, daily sick call, and follow-up care for recurrent or chronic health care problems are provided at all Rikers Island facilities, the Manhattan Detention Center and the Vernon C. Bain Center in the Bronx.

Fiscal 2011 Preliminary Budget Actions

- **Correctional Health – Vacancy and Contract Reductions.** The Department proposes to reduce spending on Correctional Health services by \$1.13 million in Fiscal 2011 and \$2.27 million in Fiscal 2012. These savings would be achieved through vacancy reductions and operational efficiencies to ancillary and supportive services.
- **Eliminate funding to Two School Based Health Centers (SBHCs).** The Department proposes to reduce spending on SBHCs by \$285,000 in Fiscal 2012 and in the outyears by eliminating funding to the following SBHCs: Thurgood Marshall Academy for Learning and Social Change and in Manhattan George W. Wingate High School in Brooklyn. These SBHCs were selected due to low capacity and low performance, respectively.
- **Reduction to City Council Funding for Child Health Clinics.** The Department initially proposed a Fiscal 2011 reduction to City Council HHC pass-through funding for child health clinics in the City tax levy amount of \$270,000. The total decrease in spending would have been \$591,000 when accounting for the Article 6 state match. This reduction amount is proportionate to the Agency's overall Fiscal 2011 PEG target. After several rounds of negotiation with the Administration, the Council was able to fully restore this proposed cut.
- **HHC Intra-City Agreement Reductions to Child Health Clinics.** The Department proposes to reduce its HHC Intra-City agreement (pass-through funding) for child health clinics by \$224,000 in Fiscal 2011 and \$448,000 in Fiscal 2012.

HHC Child Health clinics treat all New York children from birth to age 21. HHC child health clinics provide the medical attention children need to stay healthy, including immunizations, physicals and treatment for just about everything from the common cold to more serious conditions, like asthma. Families also have access to specialists outside of the center, including a wide range of pediatric subspecialists.

Child health clinics are staffed by pediatricians and nurses who speak the languages of the communities they serve. Clinics are conveniently located throughout the City and in many public housing buildings. A list of HHC's Child Health Clinics can be found at the following link on HHC's website.

<http://www.nyc.gov/html/hhc/html/community/childhealth.shtml>

- **Agencywide Layoffs – Health Care Access and Improvement.** The Department proposes to achieve savings of \$16,000 in Fiscal 2011 and nearly \$65,000 in Fiscal 2012 in total spending through laying off 1 staff member. This layoff would affect the repair and maintenance of dental equipment associated with former DOHMH oral health program; however, since the dental program no longer exists, so there would be no service impact.
- **Agencywide Program Reductions and Efficiencies – Health Care Access and Improvement.** The Department proposes to achieve savings of \$80,000 in Fiscal 2011 and \$109,000 in Fiscal 2012 in total spending through a one full-time vacancy reduction.

- **PS Underspending and Efficiencies – Health Care Access and Improvement.** The Department identified one-time savings of \$733,000 in Fiscal 2011 in PS accruals.

State Budget Actions

- **Elimination of General Public Health Work Optional Services – Dental Health Services.** The State Executive Budget proposes eliminating Article 6 funding for optional services. Article 6 funding is State aid to localities for the administration of select public health services via New York State Public Health Law and offers a 36 percent matching rate. According to the State Executive Budget, Article 6 reimbursement for the General Public Health Work program would be limited to basic services. While the reimbursement rate would remain at 36 percent, reimbursement for all optional services would be discontinued. Based on the Department’s current spending, the impact of these cuts on an annual basis to dental health services would be a loss of \$290,000.

Council Initiatives and Funding

The Council provided funding for the following initiatives in the Health Care Access and Improvement program area for Fiscal 2011. As Council funding is renegotiated annually and allocated on a one-time basis, the following funding is not included in the Fiscal 2012 Preliminary Budget.

Health Care Access and Improvement	
<i>Dollars in Thousands</i>	
Child Health Clinics	\$5,000
New York University Mobile Dental Van	268
Primary Care Initiative PEG Restoration	670
Subtotal	\$5,938

The Council restored \$5 million to ensure that HHC’s child health clinics remained open and provided enhanced levels of access and quality care, \$268,000 for mobile dental care to medically underserved children citywide and \$670,000 for the Department’s school based health clinics and HHC’s primary care expansion initiative.

Performance Measures

	FY 08	FY 09	FY 10	FY 11 4-Month Actual	Target FY 12
Total correctional health clinical visits (includes intake exams, sick calls, follow-up, mental health and dental)	817,437	838,467	817,012	283,546	*

Environmental Disease Prevention

The Bureau of Environmental Disease Prevention prevents and controls environmentally and occupationally related diseases. Programs include Lead Poisoning Prevention, Environmental and Occupational Disease Epidemiology and the Emergency Preparedness Unit.

The Environmental Disease Prevention budget for Fiscal 2012 is \$10 million which is \$444,000, or four percent, less than the Fiscal 2011 Adopted Budget and represents less than one percent of total proposed Department spending for Fiscal 2012. The change in funding is attributed to a combination of reductions to City funding in order to close the City's budget gap and increased revenue from restaurant inspections as well as grant award adjustments and Article VI adjustments at the State level.

<i>Dollars in thousands</i>	2009 Actual	2010 Actual	2011 Adopted	2011 Feb Plan	2012 Feb Plan	Difference* 2012 vs. 2011
Spending						
Personal Services						
Full-Time Salaried - Civilian	\$8,837	\$8,982	\$8,736	\$8,347	\$8,320	(\$416)
Other Salaried & Unsalariied	325	389	331	365	331	0
Overtime	41	73	13	22	13	0
Additional Gross Pay	403	570	207	218	207	0
Fringe	6	7	1	(132)	1	0
Subtotal, PS	\$9,611	\$10,021	\$9,287	\$8,821	\$8,872	(\$416)
Other than Personal Services						
Supplies and Materials	\$136	\$233	\$110	\$100	\$110	\$0
Property and Equipment	104	89	159	142	159	0
Other Services and Charges	663	579	535	528	507	(28)
Contractual Services	406	253	563	621	563	0
Subtotal, OTPS	\$1,309	\$1,154	\$1,366	\$1,392	\$1,338	(\$28)
TOTAL	\$10,920	\$11,175	\$10,653	\$10,212	\$10,210	(\$444)
Funding						
City Funds	NA	NA	5,660	7,979	8,481	2,822
State	NA	NA	286	(1,960)	(2,979)	(3,265)
Federal - Other	NA	NA	3,958	3,443	3,958	0
Other Categorical	NA	NA	750	750	750	0
Intra-City	NA	NA	0	0	0	0
TOTAL	\$10,920	\$11,175	\$10,653	\$10,212	\$10,210	(\$444)

*The difference of Fiscal 2011 Adopted compared to Fiscal 2012 February Plan funding.

Performance Measures

	FY 08	FY 09	FY 10	FY 11 4-Month Actual	Target FY 12
Childhood Blood Lead Levels – New Cases among children less than 18 years requiring environmental intervention for lead poisoning	584	500	532	208	*
Primary address inspected within 5 business days (%)	90.2%	88.6%	86.9%	84.0%	95.0%
New cases among children aged 6 months to less than 6 years with blood lead levels greater than or equal to 10 micrograms per deciliter	1,822	1,455	1,398	590	*

The number of new cases among children less than 18 years requiring environmental intervention for lead poisoning decreased by 13.3 percent from the same period in Fiscal 2010. The decrease reflects the continued success of the city's lead poisoning prevention activities.

Epidemiology

The Epidemiology Division provides timely, systematic, and ongoing collection, analysis and dissemination of data to monitor health trends and assist in the development of appropriate interventions. The Department also registers, processes, certifies, analyzes, and issues reports of births, deaths, and spontaneous and induced terminations of pregnancy, and coordinates public health training and education initiatives for agency staff and health professionals throughout the City.

The Epidemiology budget for Fiscal 2012 is \$11 million which is \$399,000, or 3.5 percent less than the Fiscal 2011 Adopted Budget and represents less than one percent of total proposed Department spending for Fiscal 2012. The change in funding is attributed to a combination of reductions to City funding in order to close the City's budget gap and increased revenue from restaurant inspections as well as grant award adjustments and Article VI adjustments at the State level.

<i>Dollars in thousands</i>	2009 Actual	2010 Actual	2011 Adopted	2011 Feb Plan	2012 Feb Plan	Difference* 2012 vs. 2011
Spending						
Personal Services						
Full-Time Salaried - Civilian	\$9,021	\$9,280	\$8,047	\$9,012	\$7,877	(\$171)
Other Salaried & Unsalari ed	439	573	664	692	664	0
Overtime	165	242	204	204	204	0
Additional Gross Pay	257	339	249	249	249	0
Fringe	1	2	2	2	2	0
Subtotal, PS	\$9,882	\$10,436	\$9,166	\$10,158	\$8,995	(\$171)
Other than Personal Services						
Supplies and Materials	\$179	\$158	\$243	\$725	\$243	\$0
Property and Equipment	334	300	454	295	454	0
Other Services and Charges	2,161	2,149	826	2,027	598	(228)
Contractual Services	1,159	951	852	3,154	852	0
Subtotal, OTPS	\$3,832	\$3,558	\$2,375	\$6,201	\$2,147	(\$228)
TOTAL	\$13,715	\$13,994	\$11,541	\$16,359	\$11,142	(\$399)
Funding						
City Funds	NA	NA	5,697	6,910	5,441	(256)
State	NA	NA	3,301	3,538	3,158	(144)
Federal - Other	NA	NA	0	2,589	0	0
Other Categorical	NA	NA	2,542	3,322	2,543	1
Intra-City	NA	NA	0	0	0	0
TOTAL	\$13,715	\$13,994	\$11,541	\$16,359	\$11,142	(\$399)

*The difference of Fiscal 2011 Adopted compared to Fiscal 2012 Preliminary Plan funding.

Key activities during Fiscal 2010 included special studies on health impacts of the World Trade Center attacks, maintaining adult data collection initiatives while expanding child health and cardiovascular disease data collection, and expanding data collection, outreach and education with physicians in hospitals and other care settings. The Department would also continue roll-out of its Electronic Death Registration System, which would be integrated with the birth and death certificate image retrieval systems, and includes large hospitals, hospice care organizations, and funeral homes.

Fiscal 2012 Preliminary Budget Actions:

- **Agencywide Layoffs – Epidemiology.** The Department proposes to achieve savings of \$36,000 in Fiscal 2011 and nearly \$106,000 in Fiscal 2012 in total spending from two staff layoffs. These layoffs would affect administrative functions which would be absorbed by existing staff and may result in delayed/reduced support services for the Division of Epidemiology.
- **Agencywide Program Reductions and Efficiencies – Epidemiology.** The Department proposes to achieve savings of \$329,000 in Fiscal 2011 and nearly \$416,000 in Fiscal 2012 in total spending through a combination of staff attrition and program vacancies. One full-time position would be lost through a funding shift, affecting administrative and operational support services for the division. The core functions would be assumed by other staff and may create additional administrative work for the Deputy Commissioner. Additionally, efficiencies would be achieved by reducing journal subscriptions, software purchasing, upgrades to electronic systems and the scope of study of supportive housing.

Office of Chief Medical Examiner

The Office of Chief Medical Examiner (OCME) is responsible for investigating deaths resulting from criminal violence, accident or suicide; that occur suddenly, when in apparent good health; when unattended by a physician; in custody; or occurring in any suspicious or unusual manner. The Office also investigates deaths where an application for cremation is made. The Office provides additional forensic services, including DNA testing, to support criminal investigations. The Office also manages all functions of the City mortuary, including the retrieval and processing of deceased bodies; assistance with autopsies; and body preparation for City burial.

The Office of Chief Medical examiner budget for Fiscal 2012 is \$59.3 million which is \$5.5 million, or 8.5 percent, less than the Fiscal 2011 Adopted Budget. This budget comprises less than four percent of the Department's overall proposed spending for Fiscal 2012. The change in funding is attributed to a combination of reductions to City funding in order to close the City's budget gap, federal grant award adjustments to align the budget closely with grant award letters and Article VI adjustments to align the budget with State reimbursement law.

	2009	2010	2011	2011	2012	Difference*
<i>Dollars in thousands</i>	Actual	Actual	Adopted	Feb Plan	Feb Plan	2012 vs. 2011
Spending						
Personal Services						
Full-Time Salaried - Civilian	\$39,485	\$42,049	\$42,085	\$44,350	\$39,808	(\$2,277)
Other Salaried & Unsalariated	1,495	342	1,586	497	1,586	0
Overtime	1,409	1,792	916	1,558	860	(56)
Additional Gross Pay	1,641	1,731	635	913	491	(144)
Fringe	18	44	15	15	15	0
Subtotal, PS	\$44,048	\$45,959	\$45,238	\$47,332	\$42,761	(\$2,476)
Other than Personal Services						
Supplies and Materials	\$4,385	\$6,100	\$3,566	\$6,677	\$3,980	\$414
Property and Equipment	1,547	1,719	4,084	6,268	1,941	(2,143)
Fixed and Misc Charges	16	22	17	17	17	0
Other Services and Charges	7,579	6,697	7,135	8,013	7,177	41
Contractual Services	8,308	5,095	4,787	6,582	3,471	(1,317)
Subtotal, OTPS	\$21,835	\$19,633	\$19,589	\$27,557	\$16,585	(\$3,004)
TOTAL	\$65,882	\$65,592	\$64,826	\$74,889	\$59,346	(\$5,480)
Funding						
City Funds	NA	NA	45,344	43,147	43,003	(2,341)
State	NA	NA	15,046	17,663	15,806	760
Federal - Other	NA	NA	4,436	13,803	537	(3,899)
Other Categorical	NA	NA	0	44	0	0
Intra-City	NA	NA	0	231	0	0
TOTAL	\$65,882	\$65,592	\$64,826	\$74,889	\$59,346	(\$5,480)

*The difference of Fiscal 2011 Adopted compared to Fiscal 2012 Preliminary Plan funding.

Programmatic Review

Working closely with the New York Police Department (NYPD) and the District Attorney's Office, the independent Office of Chief Medical Examiner (OCME) is responsible for the investigations of persons who die within New York City from criminal violence, by casualty or by suicide, suddenly, when in apparent good health, when unattended by a physician, in a correctional facility, or in any suspicious or unusual manner. The Agency is also responsible for coordinating the burial of unclaimed or unidentified bodies, consequently to Potter's Field on Hart Island, Bronx. The amount of burials range between 2,000 to 3,000 per year.

OCME also houses the nation's largest public forensic DNA laboratory, responsible for performing DNA analysis on nearly every category of crime occurring in the City, including homicide, rape, property crime, and gun/weapons cases. Due to the large volume of casework the laboratory processes each year, OCME is the largest contributor of forensic crime scene DNA profiles in the country. OCME continues to be the custodian of all unclaimed or unidentified World Trade Center (WTC) remains until the World Trade Center Memorial is completed in lower Manhattan.

Fiscal 2012 Preliminary Budget Actions

- **OCME – Additional Revenue.** The OCME would claim additional Article 6 funding from the State, using the additional revenue to supplant City tax levy dollars in the amount of \$27,000 in Fiscal 2011 and \$40,000 in Fiscal 2012.
- **OCME – Grant Revenue.** The OCME would shift staff to various grants, achieving savings to the City in the amount of \$464,000 in Fiscal 2011 and \$116,000 in Fiscal 2012. These grants – mainly, the federal Edward Byrne Grant and other homeland security grants – would be used to fund some positions previously funded through City tax levy.
- **OCME – Layoffs.** OCME would generate savings of \$796,000 in Fiscal 2012 by layoffs of 17 staff from a variety of program areas. While these layoffs are not expected to impact DNA or Mortuary operations, the OCME anticipates a delay in the turnaround time for nearly all other OCME services.
- **OCME – PS Furloughs.** The OCME would furlough staff in Fiscal Years 2012 and 2013, generating savings of over half a million dollars in Fiscal 2012 and around \$300,000 in Fiscal Years 2013 and 2014.
- **OCME – Attrition and PS Efficiencies.** The OCME would achieve savings through attrition and PS accruals of more than \$1 million in Fiscal 2011 and in the outyears. A total of 15 positions have been lost through attrition including seven criminalists, one medico-legal investigator, one clerical associate, two City mortuary techs, two principal administrative associates, one secretary and one motor vehicle operator. The OCME estimates these reductions to have minimal, if any, impact; however, OCME may have greater difficulty meeting its mandate if the caseload spikes.

State Budget Actions

- Elimination of General Public Health Work Optional Services - OCME.** The State Executive Budget proposes eliminating Article 6 funding for optional services. Article 6 funding is State aid to localities for the administration of select public health services via New York State Public Health Law and offers a 36 percent matching rate. According to the State Executive Budget, Article 6 reimbursement for the General Public Health Work program would be limited to basic services. While the reimbursement rate would remain at 36 percent, reimbursement for all optional services would be discontinued. Based on the Department’s current spending, the impact of these cuts on an annual basis to the OCME would be a loss of nearly a third of its overall budget, \$18.8 million, with the majority of the reduction impacting direct OCME services.

Performance Measures

	FY 08	FY 09	FY 10	FY 11 4-Month Actual	Target FY 12
Median time for MLI scene arrivals (hours)	1.5	1.6	1.6	1.6	*
Median time to complete autopsy reports (days)	49.0	48.0	53.5	50.5	51.0
Median time to process cremation requests (hours)	1.4	0.9	1.2	1.0	1.5
Median time to complete toxicology cases (days)	26.0	30.5	35.0	29.5	28.0
Median time to complete toxicology sexual assault cases (days)	16.0	17.5	17.0	15.0	17.0
Median time to complete toxicology DUI cases (days)	12.5	13.5	13.0	14.0	10.0
Average days to complete analysis of a DNA case	49.0	89.8	76.0	74.0	75.0
Median time to complete DNA homicide cases, from evidence submission to report (days)	65.0	97.0	112.0	116.0	90.0
Median time to complete DNA property crime cases, from evidence submission to report (days)	36.0	70.5	58.0	54.0	*
Median time to complete DNA sexual assault cases, from evidence submission to report (days)	37.0	17.5	19.0	22.0	50.0
DNA matches with profiles in database	1,453	1,264	1,264	521	*

In the first four months of Fiscal 2011, turnaround time for DNA reports related to sexual assault cases and homicides increased. The median time to complete DNA sexual assault cases was 22 days in this reporting period, up 47 percent from 15 days in the corresponding period of Fiscal 2010. The median time to complete DNA homicide cases was 116 days for the first four months of Fiscal 2011, a 16 percent increase from 100 days in the same period of the previous year. OCME attributes these increases to reduced staffing in the Forensic Biology laboratory and elsewhere in the agency. It also notes that DNA lab data is released to investigative agencies once it is available, while these indicators track the time from its receipt of DNA case evidence to issuance of the final OCME written case report.

Phase 3 of the World Trade Center excavation effort has been concluded, and no additional remains were recovered in the first four months of Fiscal 2011. OCME continues its related DNA identification work; 13 previously discovered remains yielded profiles linking them to other previously discovered remains. OCME continues to monitor all work at the World Trade Center site, and expects to begin Phase 4 in Calendar 2011.

Agency Resources

	FY 08	FY 09	FY 10	FY 11 4-Month Actual	Target FY 12
Expenditures (\$ millions)	\$68.4	\$79.1	\$65.6	\$16.0	\$59.3
Revenues (\$000)	\$5	\$6	\$2	\$1	\$503
Personnel	661	652	652	625	691
Overtime paid (\$000)	\$2,869	\$1,383	\$1,791	\$452	*

World Trade Center Related Programs

Funding in this program area is for a comprehensive and confidential health survey of those most directly exposed to the events of 9/11. This allows health professionals to compare the health of those most exposed with the health of the general population. Funding in this program area is also used for mental health services for World Trade Center responders.

The Fiscal 2012 budget for World Trade Center Related Programs is \$5.5 million which is \$1.8 million, or 24 percent, less than the Fiscal 2011 Adopted Budget and comprises less than one percent of the total proposed spending for the Department for Fiscal 2012. The change in funding is attributed to a combination of reductions to City funding in order to close the City's budget gap and phase out of certain 9/11 related programming. The change in funding is also attributed to federal grant award adjustments to align the budget closely with grant award letters and Article VI adjustments to align the budget with State reimbursement law.

<i>Dollars in thousands</i>	2009 Actual	2010 Actual	2011 Adopted	2011 Feb Plan	2012 Feb Plan	Difference* 2012 vs. 2011
Spending						
Personal Services						
Full-Time Salaried - Civilian	\$3,783	\$4,092	\$3,065	\$4,455	\$2,717	(\$348)
Other Salaried & Unsalariated	213	186	78	268	58	(20)
Overtime	32	16	0	0	0	0
Additional Gross Pay	47	65	0	0	0	0
Fringe	5	4	0	0	0	0
Subtotal, PS	\$4,080	\$4,362	\$3,143	\$4,723	\$2,775	(\$368)
Other than Personal Services						
Supplies and Materials	\$420	\$131	\$166	\$458	\$70	(\$96)
Property and Equipment	82	28	152	44	144	(8)
Other Services and Charges	671	514	3,216	1,231	2,273	(943)
Social Services	223	223	0	0	0	0
Contractual Services	8,429	10,745	602	7,084	239	(364)
Subtotal, OTPS	\$9,825	\$11,641	\$4,136	\$8,817	\$2,725	(\$1,411)
TOTAL	\$13,905	\$16,003	\$7,279	\$13,540	\$5,500	(\$1,779)
Funding						
City Funds	NA	NA	2,895	2,853	1,287	(1,608)
State	NA	NA	376	373	376	0
Federal - Other	NA	NA	4,008	10,315	3,837	(171)
Other Categorical	NA	NA	0	0	0	0
Intra-City	NA	NA	0	0	0	0
TOTAL	\$13,905	\$16,003	\$7,279	\$13,540	\$5,500	(\$1,779)

*The difference of Fiscal 2011 Adopted compared to Fiscal 2012 Preliminary Plan funding.

Administration - General

This program area includes the Commissioner's office and all other agency-wide administrative services, including management information and analysis, management planning, finance, personnel, labor relations, general services, data processing, general counsel, public information and operations site support, which includes security and custodial services. Council funding is not reflected in the proposed Fiscal 2012 Preliminary Budget and accounts for the majority of the large proposed reduction to Contractual Services.

The General Administration budget for Fiscal 2012 is \$171 million, which is \$26 million, or 13 percent, less than the Fiscal 2011 Adopted Budget and comprises 11 percent of total proposed Department spending for Fiscal 2012. This budget represents 13 percent in overall Department spending. The change in funding is attributed to a combination of reductions to City funding in order to close the City's budget gap as well as State aid reductions.

<i>Dollars in thousands</i>	2009 Actual	2010 Actual	2011 Adopted	2011 Feb Plan	2012 Feb Plan	Difference* 2012 vs. 2011
Spending						
Personal Services						
Fulltime Salaried	\$82,887	\$86,793	\$83,864	\$85,551	\$85,094	\$1,230
Other Salaried & Unsalariated	5,235	5,473	5,881	6,150	5,827	(54)
Overtime	2,531	2,572	872	1,022	872	0
Additional Gross Pay	2,684	3,208	2,088	2,268	2,088	0
Fringe	263	231	68	304	68	0
Amounts to be Scheduled	0	0	2,631	1,631	2,631	0
Other	(31)	(49)	0	0	0	0
Subtotal, PS	\$0	\$0	\$0	\$0	\$0	\$0
Other than Personal Services						
Supplies and Materials	\$6,638	\$3,849	\$4,747	\$5,142	\$4,694	(\$53)
Property and Equipment	3,786	619	757	1,330	757	0
Other Services and Charges	47,345	48,163	63,580	69,310	64,101	521
Contractual Services	49,654	45,635	32,708	39,250	5,044	(27,664)
Fixed and Misc Charges	363	551	68	68	68	0
Subtotal, OTPS	\$107,785	\$98,816	\$101,860	\$115,100	\$74,665	(\$27,195)
TOTAL	\$201,354	\$197,044	\$197,264	\$212,026	\$171,244	(\$26,020)
Funding						
City Funds	NA	NA	\$113,214	\$118,232	\$96,447	(\$16,767)
State	NA	NA	72,103	74,939	62,850	(9,253)
Federal - Other	NA	NA	8,909	15,469	8,909	0
Other Categorical	NA	NA	2,847	2,970	2,847	0
Intra-City	NA	NA	191	416	191	0
TOTAL	\$201,354	\$197,044	\$197,264	\$212,026	\$171,244	(\$26,020)

*The difference of Fiscal 2011 Adopted compared to Fiscal 2012 Preliminary Plan funding.

Fiscal 2012 Preliminary Budget Actions

- **Reduction to City Council Funding.** The Department proposed to eliminate \$422,000 in projected historical City Council underspending for Fiscal 2011. Including the state match, the total reduction in spending would be \$525,000.
- **Central Administration Layoffs.** The Department proposes layoffs of eight staff in Central Administration and the Executive Office that would reduce spending by \$233,000 in Fiscal 2011 and \$701,000 in Fiscal 2012. These proposed layoffs are from the following Central Administration units/division: Facilities Planning and Management; Human Resources and Labor Relations; Communications; Take Care New York; and Intergovernmental Affairs. The Agency functions would be absorbed by remaining staff with no impact to direct services.
- **Central Administration PS Efficiencies.** Central Administration and the Executive Office would achieve PS efficiencies savings in the amount of \$474,000 in Fiscal 2011 and \$75,000 in Fiscal 2012 through accruals and attrition. Functions from attrited positions would be absorbed by remaining staff.
- **PS Underspending and Efficiencies – Health Administration.** The Department identified one-time savings of \$350,000 in Fiscal 2011 in PS accruals.
- **Agency Relocation.** The DOHMH would consolidate its operations by relocating to a new location, 2 Gotham Center in Long Island City, Queens. The Agency is planning to move in April 2011. The Agency has identified a new need of \$1 million in additional funding for Fiscal 2011 and Fiscal 2012. This new need accounts for expenses related to moving 3,800 employees from 18 locations to the new central office, including a document scanning project and decommissioning vacated spaces.

Agency Resources

	FY 08	FY 09	FY 10	FY 11 4-Month Actual	Target FY 12
Revenues (\$ millions)	\$129.5	\$65.3	\$69.2	\$24.0	\$80.2
Expenditures (\$ millions)	\$1,518.5	\$1,646.3	\$1,619.9	\$1,006.2	\$1,483.6
Personnel	6,070	6,073	5,578	5,445	5,358
Overtime paid (\$000)	\$5,509	\$6,216	\$7,772	\$1,449	*
Capital commitments (\$ millions)	\$52.7	\$51.1	\$50.5	\$114.4	\$58.0
Human services contract budget (\$ millions)	\$800.6	\$947.8	\$934.4	\$274.1	\$901.7
Work Experience Program (WEP) participants assigned	192	188	293	175	*

Mental Hygiene

The Department provides planning, funding and oversight of mental health, mental retardation, developmental disabilities, alcohol and drug abuse and Early Intervention services. Over 450,000 mental hygiene consumers are served annually through contracts and agreements with community-based provider agencies, hospitals and other City agencies. The Department also seeks to address the needs of children with emotional, behavioral, developmental, and/or substance abuse needs and their families. Key City and State initiatives include continued implementation of supportive housing services through the New York/New York III program, a Mental Health/Criminal Justice initiative to improve care monitoring and coordination for at risk individuals, and an overdose prevention program with targeted education and expanded access to buprenorphine to reduce opioid dependence. *Details regarding mental hygiene for the Department are outlined in a separate report.*

Appendix A: Budget Actions in the November and February Plans

<i>Dollars in thousands</i>	FY 2011			FY 2012		
	City	Non-City	Total	City	Non-City	Total
Agency Budget as of June 2011 Plan	\$630,629	\$968,732	\$1,599,361	\$614,736	\$950,238	\$1,564,974
Program to Eliminate the Gap (PEGs)						
Agencywide Reductions and Layoffs	(\$2,286)	(\$1,108)	(\$3,394)	(\$4,843)	(\$2,047)	(\$6,890)
Central Admin - PS Efficiencies & Layoffs	(488)	(219)	(707)	(562)	(214)	(776)
City Council Reduction	(422)	(103)	(524)	0	0	0
Correctional Health - Medicaid & Reductions	(2,624)	(113)	(2,737)	(3,665)	(228)	(3,893)
Early Intervention - Administration Revenue Maximization	(750)	750	0	0	0	0
Early Intervention - Service Coordination	0	0	0	(244)	0	(244)
Intra-cities with HHC	(2,274)	(108)	(2,382)	(3,960)	(202)	(4,162)
Intra-city Agreements for Mental Hygiene	(462)	0	(462)	(1,014)	0	(1,014)
Intra-city with DEP	(20)	(11)	(31)	(20)	(11)	(31)
Intra-city with HPD	(18)	(10)	(28)	(18)	(10)	(28)
Mental Hygiene Contracted Services	(1,446)	0	(1,446)	(4,858)	0	(4,858)
OCME Revenue and Reductions	(1,474)	(85)	(1,559)	(2,241)	(433)	(2,674)
PS Underspending & Efficiencies	(2,765)	(1,156)	(3,921)	(257)	(0)	(257)
Public Health Lab Reductions & Layoffs	(258)	(131)	(389)	(794)	(322)	(1,116)
School Based Health Centers	0	0	0	(182)	(103)	(285)
School Health Medicaid Revenue	(6,430)	6,430	0	(8,211)	8,211	0
TB Direct Clinical Care & Layoffs	(247)	(136)	(383)	(993)	(415)	(1,408)
WTC MH Benefit Program Excess Funding	0	0	0	(853)	0	(853)
Total, PEGs	(\$21,963)	\$4,001	(\$17,962)	(\$32,715)	\$4,228	(\$28,487)
New Needs						
2 Gotham Move	\$716	\$284	\$1,000	\$672	\$266	\$938
DOHMH License Processing	511	39	550	511	39	550
Nurse Family Partnership	0	0	0	1,000	0	1,000
Total, New Needs	\$1,227	\$323	\$1,550	\$2,183	\$305	\$2,488
Other Adjustments						
Nov Plan						
2 Gotham Move	\$2,255	\$984	\$3,239	\$1,495	\$653	\$2,148
Brain Tumor Foundation, The	(2)	1	(2)	0	0	0
Central Admin - Reductions & Layoffs	68	(0)	68	150	(0)	150
Correctional Hlth - Reductions & Shifts	471	0	471	507	1	508
Environmental Health - Red. & Layoffs	141	0	141	401	(0)	401
Friends of Firefighters, Inc.	4	0	4	0	0	0

<i>Dollars in thousands</i>	FY 2011			FY 2012		
	City	Non-City	Total	City	Non-City	Total
HHC Child Health Transfer	\$0	\$0	\$0	(\$2,763)	\$0	(\$2,763)
HHC HIV Transfer	(1,235)	0	(1,235)	(1,197)	0	(1,197)
HHC Outpatient Medication	(141)	0	(141)	(819)	(0)	(819)
HHC/Harlem Realignment	0	(0)	0	0	0	0
HPDP - Reductions and Layoffs	61	(1)	60	287	1	288
Integrated Payment System	38	15	53	43	17	60
Mental Hygiene - PS Efficiencies	33	0	33	66	(0)	66
Mental Hygiene Funding Shifts	0	315	316	0	393	393
Mental Hygiene Realignment	0	0	0	0	0	0
NFP CTL/Transfer	(600)	0	(600)	0	0	0
NFP Matching Funds	600	0	600	0	0	0
OCME Attrition	138	0	138	172	0	172
OCME Grant Revenue Offset	78	0	78	31	0	31
OCME Layoffs	0	0	0	114	0	114
OCME PS Furloughs	0	0	0	45	(0)	45
Program Efficiencies & Layoffs	112	0	112	515	0	515
Program Surplus Take-Down	(2,092)	(1,177)	(3,269)	0	0	0
PS Accruals and Reductions	33	0	33	41	0	41
PS Underspending	525	0	525	0	0	0
Public Health Labs	40	(0)	40	66	(0)	66
Public Health Labs - Layoffs	(13)	(0)	(13)	156	0	156
Reverse Transfer to DCJS	(973)	973	0	(960)	960	0
Samaritans of New York, Inc.	4	(1)	4	0	0	0
TB Direct Clinical Care & Layoffs	6	0	6	256	(0)	256
Miscellaneous - Nov Plan	0	74,043	74,043	0	71,943	71,943
Nov Plan Subtotal	(\$449)	\$78,943	\$78,494	(\$1,392)	\$78,198	\$76,806
Prelim Plan						
AOT Functional Transfer	(\$334)	\$0	(\$334)	(\$1,336)	\$0	(\$1,336)
Article 6 Realignment	(1,651)	1,517	(134)	(1,651)	1,269	(382)
CEO: Expand Access to Healthy Foods	0	0	0	182	103	285
Early Intervention - State Budget SFY11-12	0	0	0	(2,000)	0	(2,000)
Intra-City Technical Adjustment	76	0	76	76	0	76
OCME Budget Adjustment	0	1	1	129	102	231
Miscellaneous - Jan Plan	0	10,719	10,719	0	(326)	(\$326)
Prelim Plan Subtotal	(\$1,908)	\$16,026	\$14,118	(\$4,599)	\$5,377	\$778
Total, Other Adjustments	(\$2,356)	\$94,969	\$92,613	(\$5,991)	\$83,575	\$77,584
Agency Budget as of February 2012 Plan	\$607,536	\$1,068,025	\$1,675,561	\$578,213	\$964,686	\$1,542,899

*Continuation from previous page