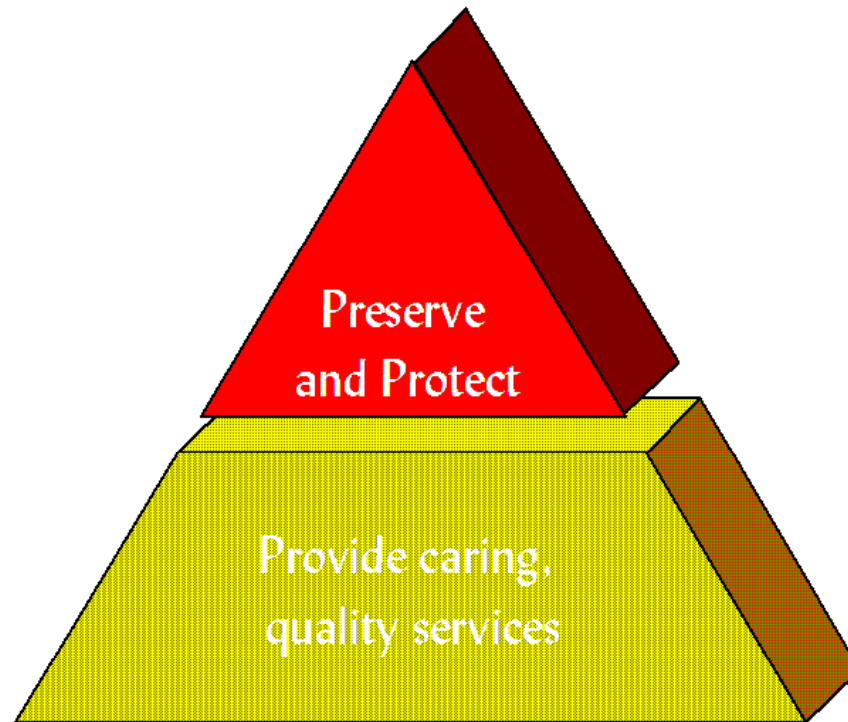


Alabama Department of Public Health

FY 2019

Budget Request

Public Health Mission



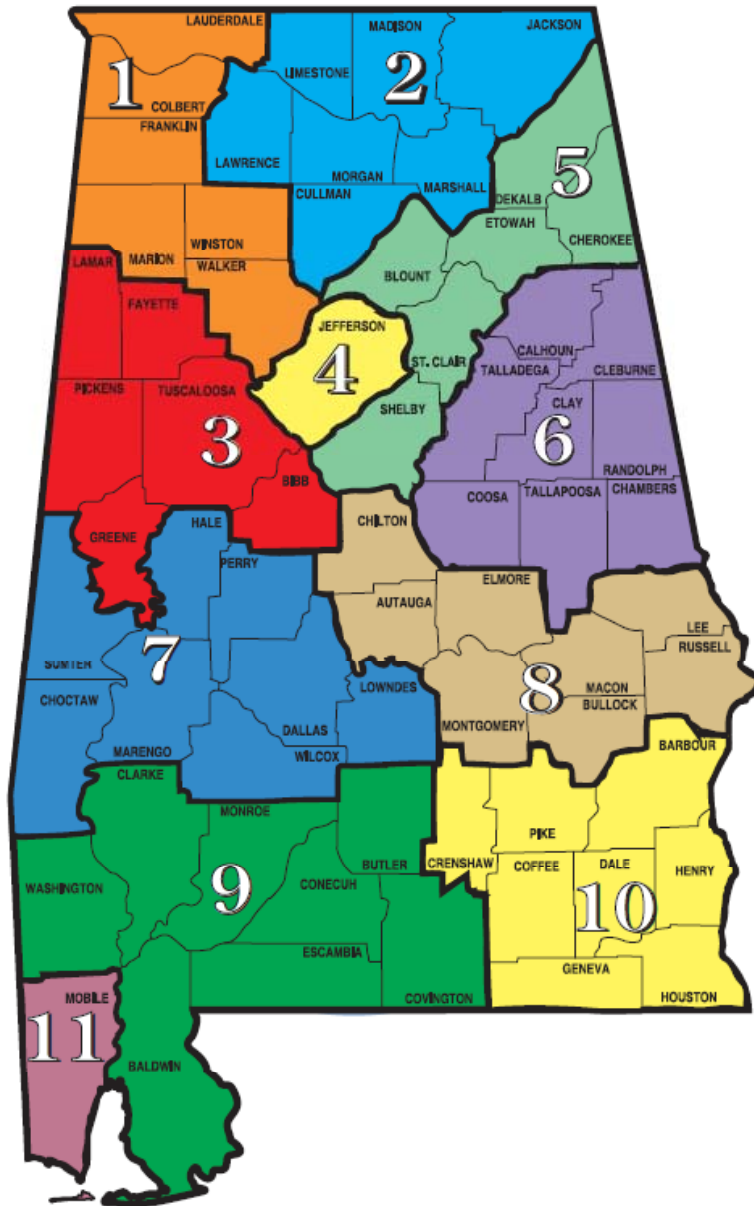
To serve the people of Alabama by assuring conditions in which they can be healthy.

Selected Public Health Program Information

- HIV/AIDS
 - Approximately 670 newly diagnosed cases in 2017
 - ADAP Enrollment 12/31/17 – 1,058
 - Health Insurance Coverage 12/31/17 - 1,802
 - Current waiting list – 0
- The Supplemental Nutrition Program for Women, Infants, and Children (WIC) Monthly Caseload of 123,993 in 2017
 - \$99 million went directly into the Alabama economy
- Infant mortality rate
 - 9.1/1,000 births in 2016

Selected Public Health Program Information

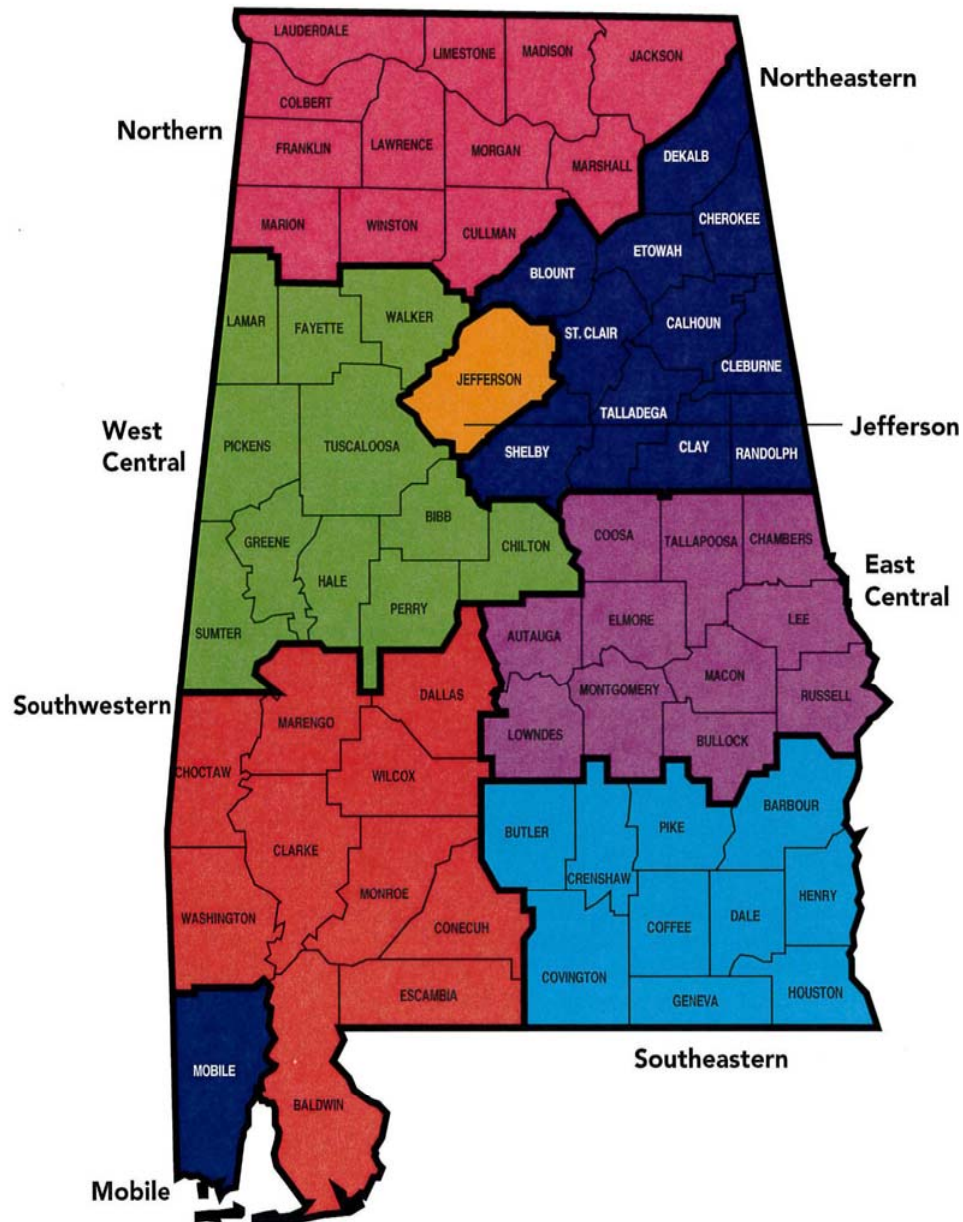
- FY 2017 Cancer Screenings
 - 97 breast cancers identified (13,700 screened)
 - 275 cervical pre-invasive & invasive cancers identified (4,312 screened)
 - 83 abnormal prostate screenings (1,443 screened)
 - 66 abnormal colorectal screenings (123 screened)



Statewide Reorganization

Prior to October 1, 2017, there were 11 Public Health Areas in the State

Each with centrally located management and administrative staff



Statewide Reorganization

As of October 1, 2017, there are now 8 Districts statewide

Fewer administrative and management staff

New configuration also allows District Administrators greater flexibility in moving staff within a District

Public Health Impact of Appropriation

- Tuberculosis
 - Appropriation aids in costly treatment of TB patients
 - On average it costs \$17,000 to treat one case of TB
 - On average it costs \$134,000 to treat one case of MDR (multi drug resistant) TB in the U.S.
 - In one Alabama MDR TB case, 7 additional people were infected
 - The medication was extremely expensive for all patients
 - A lung removal procedure in one person alone cost over \$50,000
 - Helps prevent the spread of TB and possible deaths

Public Health Impact of Appropriation

- **Breast and Cervical Cancer**
 - Provided breast and cervical cancer screening and diagnostic services
 - Services provided to women 40-64 years, below 250% of federal poverty level, and uninsured or underinsured
 - Out of all screenings conducted, 97 breast cancers indentified and 275 cervical pre-invasive and invasive cancers identified
 - General Fund appropriation provided breast and/or cervical cancer screening to 1,300 underserved women; approximately 10% of all screenings

Public Health Impact of Appropriation

- Colorectal and Prostate Cancer
 - Provided colorectal and prostate cancer screening for underserved men and women
 - 66 of 123 colorectal cancer screenings were abnormal and, as a result, polyps removed
 - 83 of 1,443 prostate cancer screenings where abnormal and treatment options were discussed

Information for Additional Public Health Budget Request

- Opioid Epidemic
 - Prescription Drug Monitoring Program (PDMP) Enhancements
 - Concern for HIV and Hepatitis C outbreaks
- Infant Mortality
- Infectious Diseases
 - Tuberculosis
 - Zika
- Childrens Health Insurance Program (CHIP), ALL Kids

General Fund Appropriation Information and Request

(in millions)

	2017	2018	2019
Appropriation (excluding CHIP)	32.3	32.5	36.1
General Fund- CHIP			53.6
Total	32.3	32.5	89.7

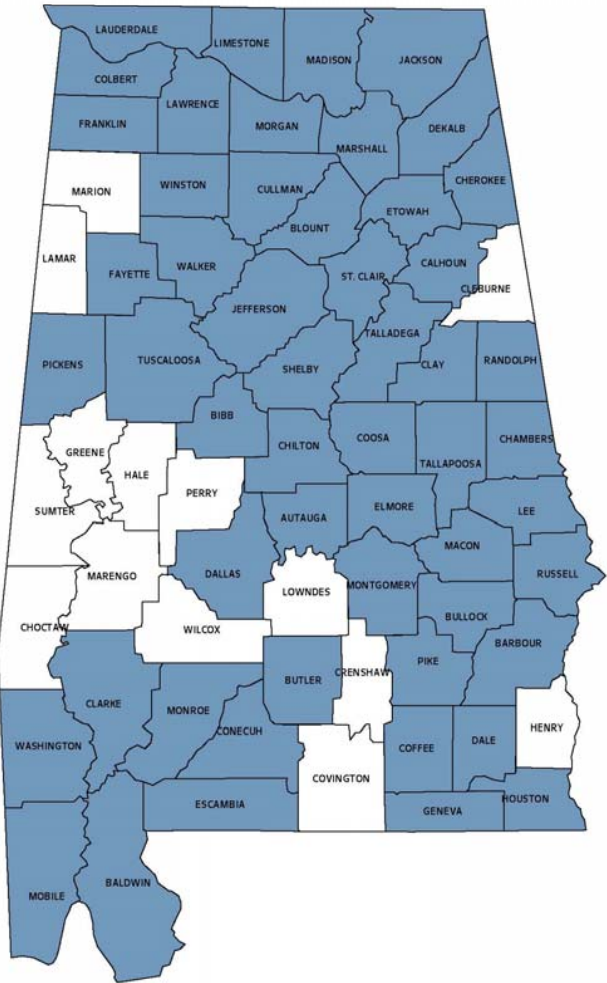
FY 2019 State Funds Requested Increase (In millions)

	General Fund	Education Trust Fund
<u>Continuation Costs</u>		
Merit Raises	0.5	0.2
Employee FICA/Retirement /Health Ins	0.2	0.1
CHIP Continuation	53.6	
<u>Initiatives</u>		
Prescription Drug Abuse Control	0.9	
Infant Mortality	1.0	
Outbreak Response	1.0	
Total Request Increase	57.2	0.3

DRUG OVERDOSE DEATHS, ALABAMA, 2016

By County of Residence

By County of Occurrence



Prescription Drug Monitoring Program

- PDMP is the “Prescription Drug Monitoring Program”
 - Contains prescription records of all controlled substances dispensed in Alabama in the past five years
 - A tool to assist prescribers and dispensers improve the clinical decisions they make every day
- The Opioid Overdose and Addiction Counsel has recommended the budget for FY19 contain a line item providing PDMP monies for operation of the program

Prescription Drug Monitoring Program (.9 Million)

- Migration to Appriss Health Aware Software
 - Current software from 2006
 - Will allow prescribers to more easily interface PDMP with their Electronic Health Systems

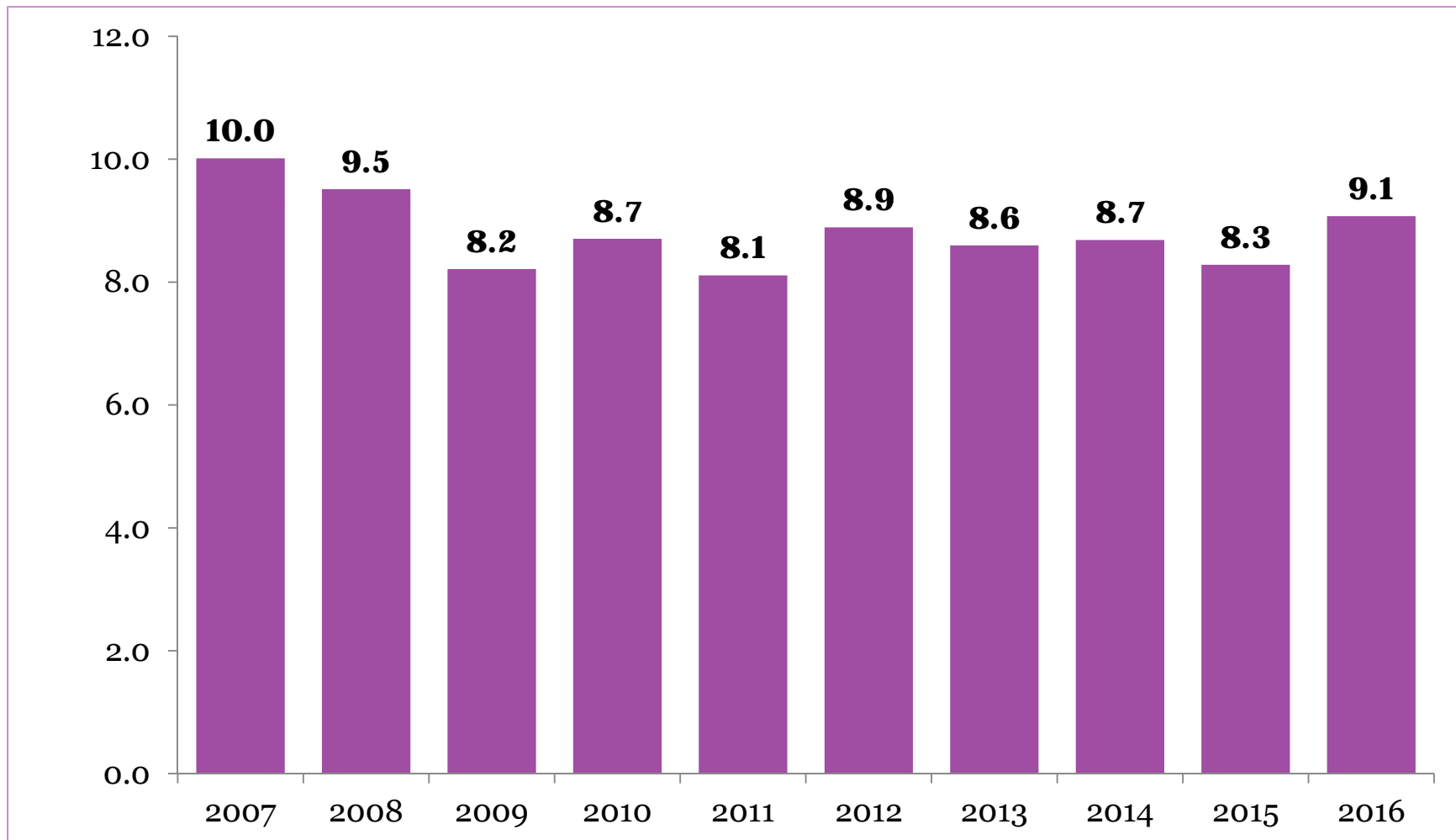
Annual Cost of PDMP

	Year One	Year Two	Year Three
Support and Maintenance	\$312,070	\$312,070	\$312,070
NarxCare	\$276,000	\$276,000	\$276,000
EHR Integration	\$375,700	\$513,500	\$651,400
Staffing	\$141,500	\$149,275	\$157,446
Total	\$1,105,270	\$1,250,845	\$1,396,916

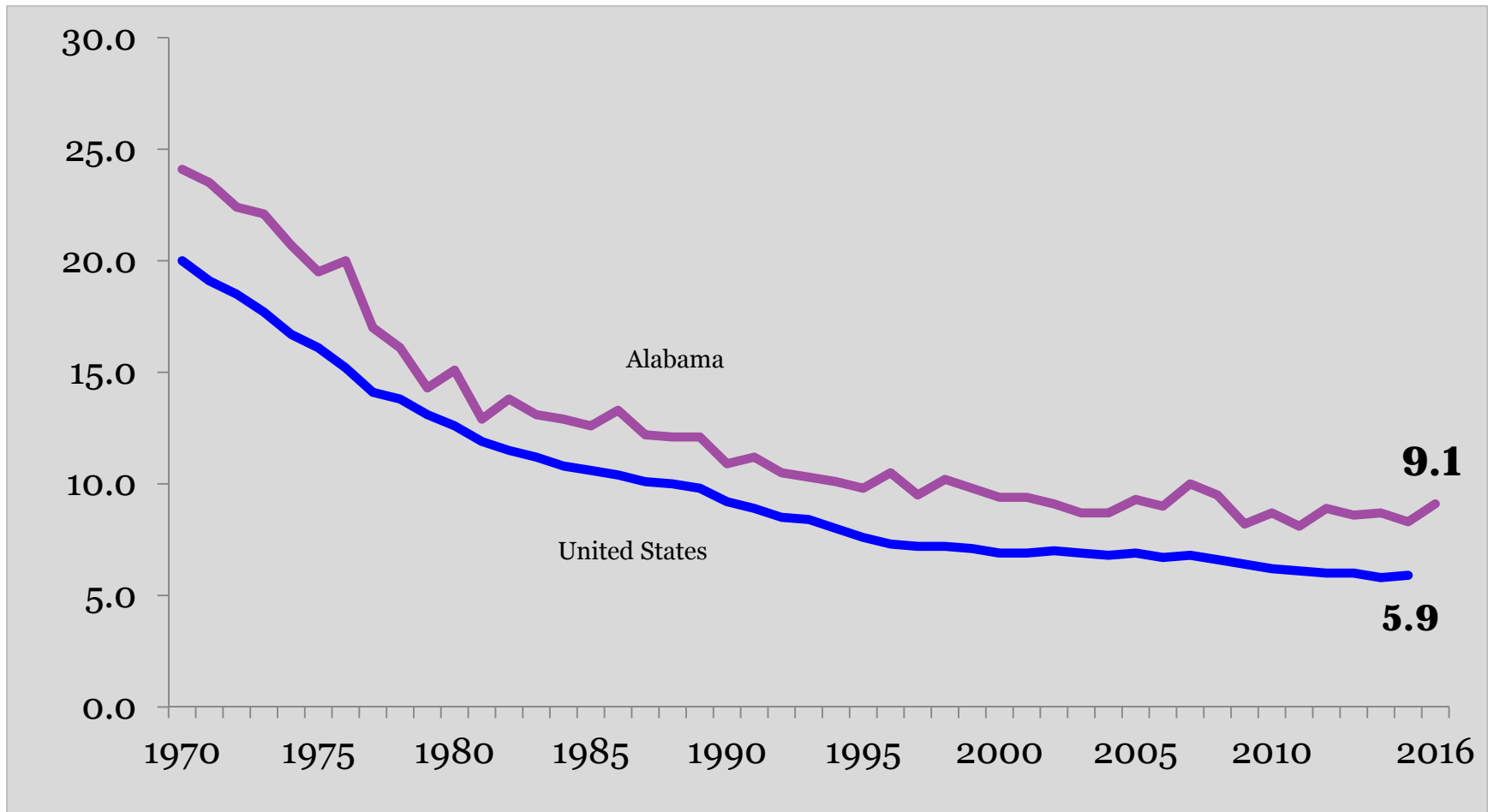
Infant Mortality (1.0 Million)

- In December, Governor's Children's Cabinet established a Task Force to address Infant Mortality
 - In light of this, the Governor has asked us to hold off on our request to see what the Task Force Recommends
- ADPH Activities
 - Expand Fetal and Infant Mortality Review activities at the local level
 - Continue Safe Sleep Initiative
 - Neonatal Abstinence Syndrome (NAS)
 - Problems with newborns who were exposed to addictive opiates during pregnancy
 - Well Woman Program
 - Management of women with Chronic Diseases
- Based on the Task Force Recommendations the budget request for this could change

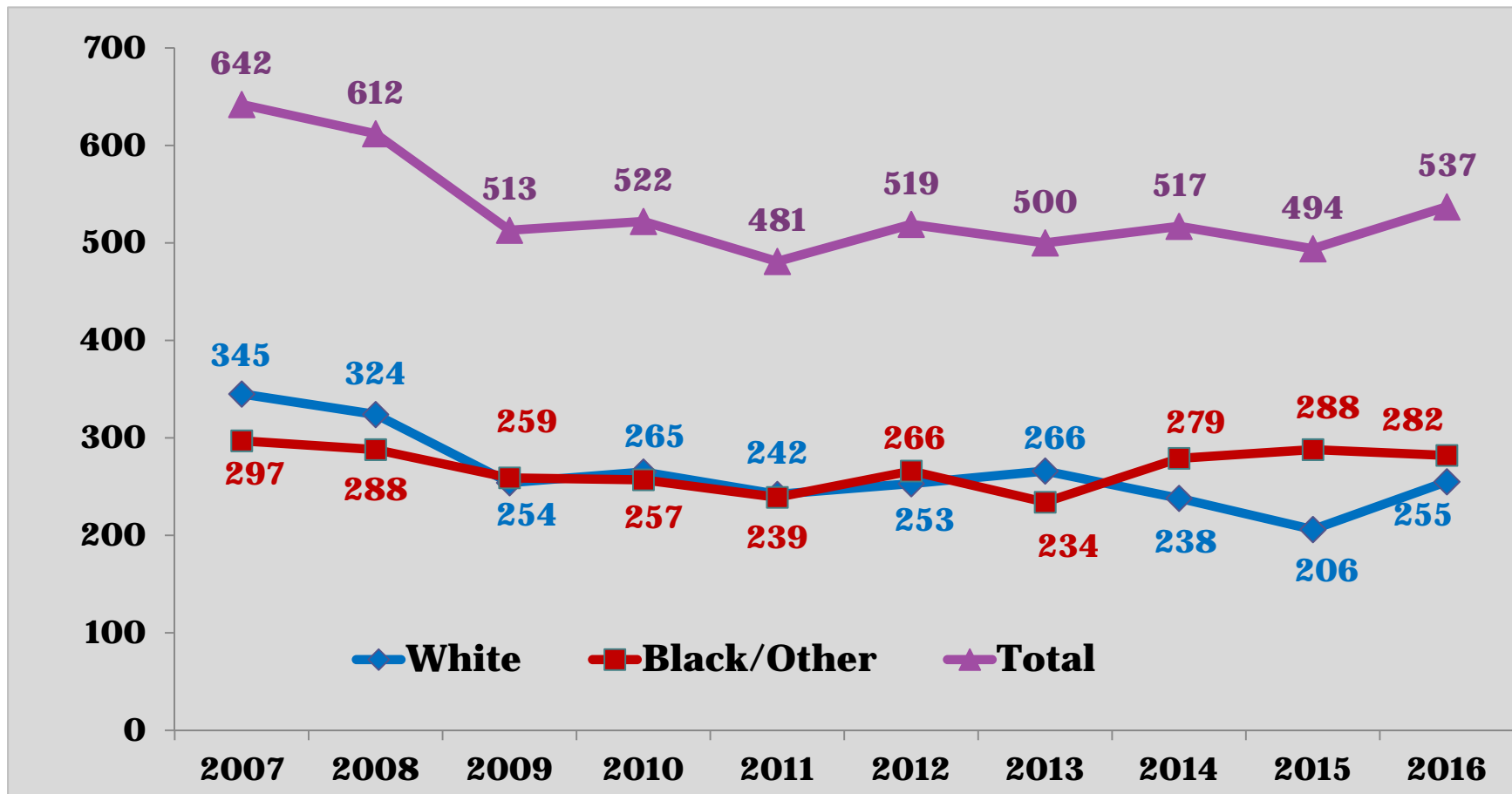
Alabama Infant Mortality Rate 2007 - 2016



Infant Mortality Alabama vs United States

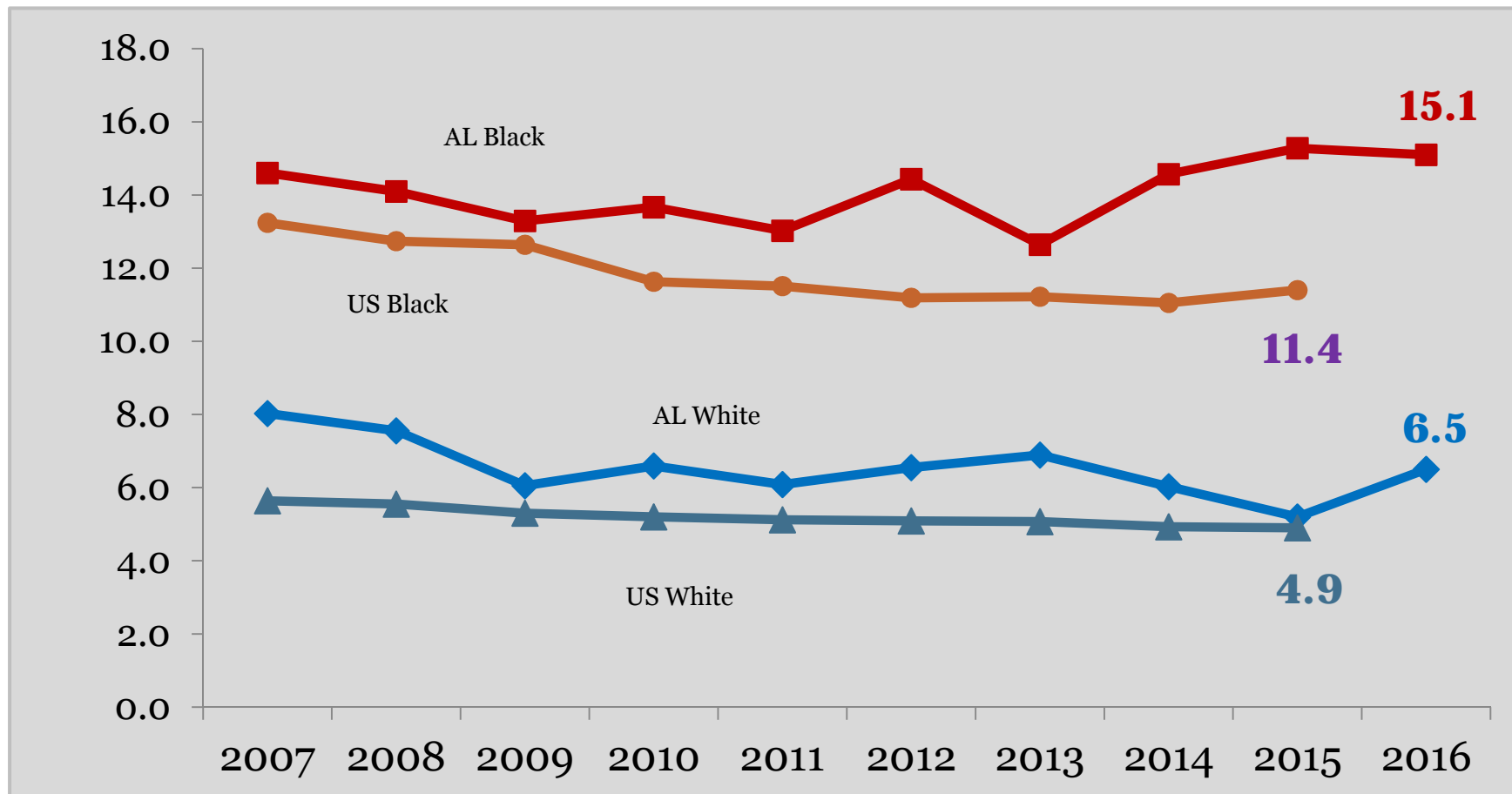


Alabama Infant Mortality by Race 2007 - 2016

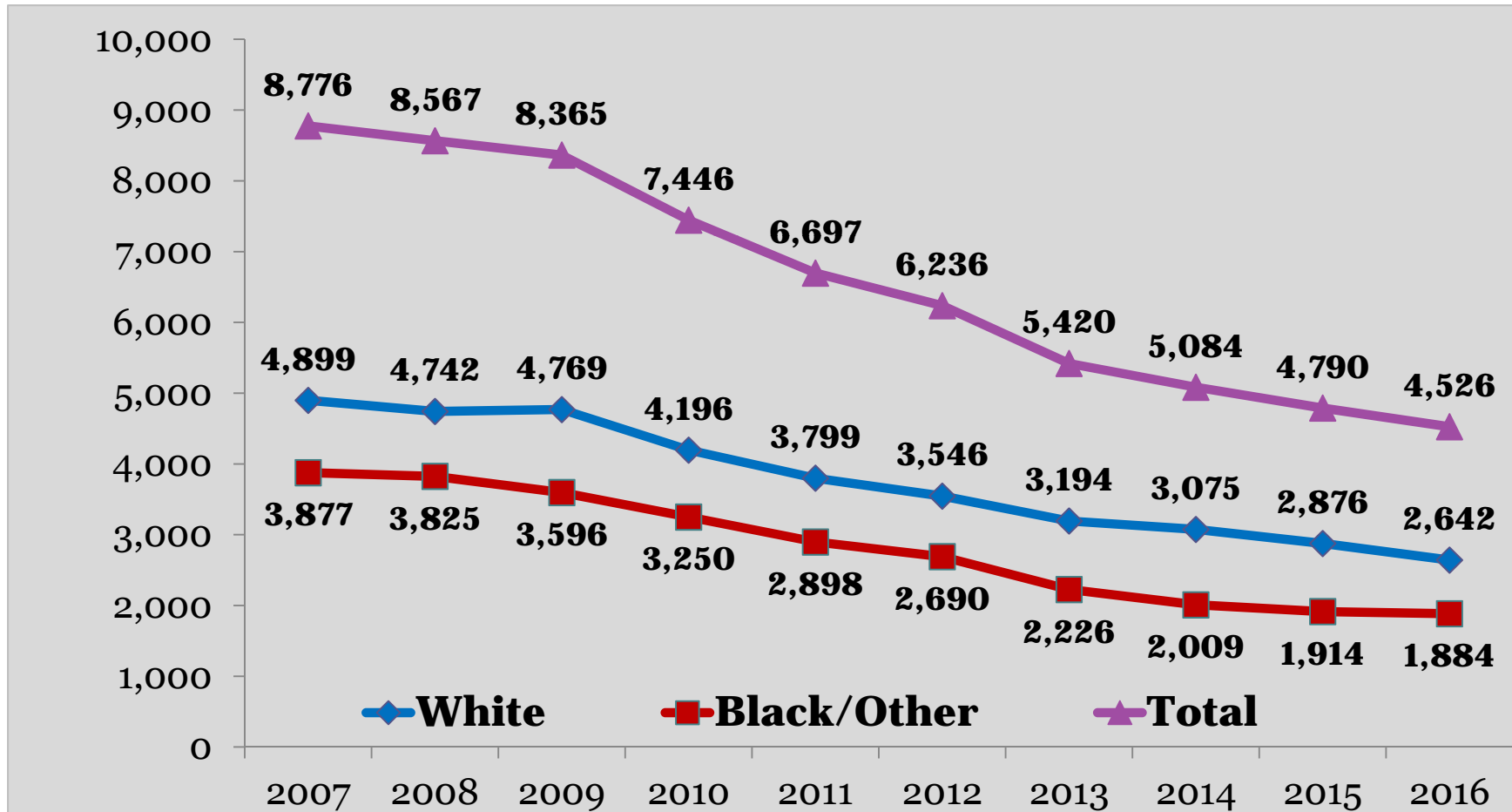


Infant Mortality

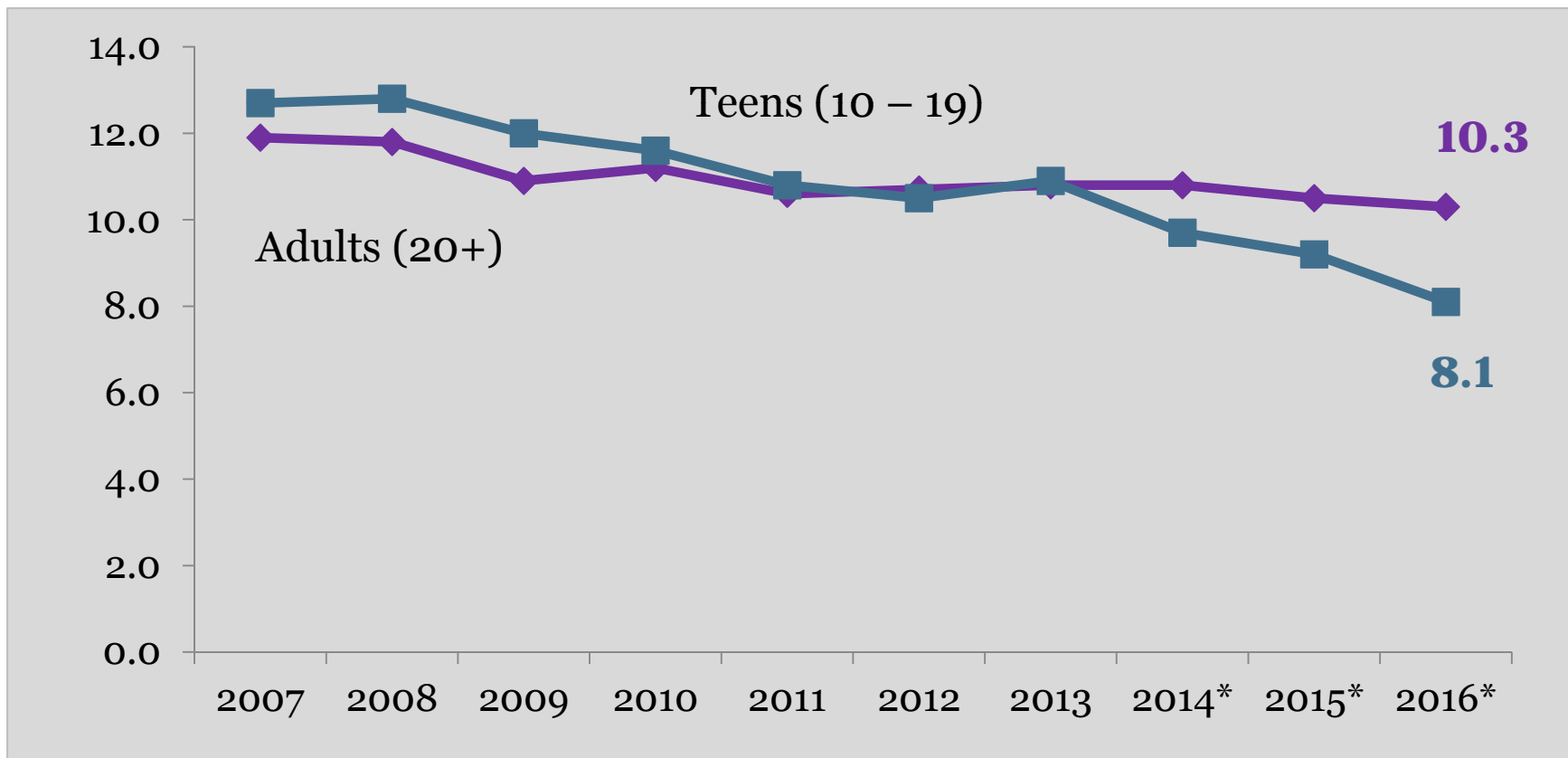
Alabama vs United States



Alabama Teen Births; 10 - 19



Maternal Smoking by Age of Mother Alabama



Outbreak Response (1.0 Million)

- Disease Outbreaks and Emerging Infectious Diseases
 - A constant threat and require investigations by staff already tasked with routine disease investigations
 - Emerging Threats: Hepatitis A, Pertussis, Tuberculosis, Avian Influenza, Zika Virus, West Nile Virus, and Multistate Outbreaks
 - During 2017 approximately 280 outbreaks were reported and investigated
 - Additional Infectious Disease and Environmental resources are needed

Outbreak Response (1.0 Million)

- Vaccine Preventable Disease Outbreaks
 - 12 Outbreaks in 2017
 - Two in a prison (chickenpox and pertussis)
 - Two in a day camp (pertussis)
 - One in a hospital (pertussis)
 - One in a community (pertussis)
 - One in a nursing home (pertussis)
 - Five from schools, colleges, and universities (mumps and pertussis)

Children's Health Insurance Program (CHIP), ALL Kids

	FY 2017	FY 2018	FY 2019
Estimated YEND Caseload	83,536	92,280	101,938
Avg Enrollment	79,574	88,200	97,432
Cost PMPM	\$207.39	\$218.27	\$227.73
General Fund	0.0	0.0	\$53.6m

Note: In FY 2016 and 2017, CHIP was 100% federally funded.

Children's Health Insurance Program

	FY 2019	FY 2020	FY 2021
Estimated YEND Caseload	101,938	112,608	124,395
Avg Enrollment	97,432	107,630	118,896
Cost PMPM	\$227.73	\$237.14	\$246.97
General Fund	\$53.6m	\$25.5m	\$70.5m

CHIP Status To-Date

- Currently approximately 85,000 insured through CHIP ALLKids
 - Another 87,000 through MCHIP
- Since inception in 1997 rate of uninsured children in Alabama has dropped from 20% to 2.4%
- The Affordable Care Act reauthorized CHIP through FY19
 - Funding expired September 30, 2017
- Hoping for 5 year reauthorization on 01/19/2018 with funding
- States have been able to spend monies in FY18 left over from FY17

CHIP Status To-Date

- There is a pot of contingency funds available to states running out of money
- The Continuing Resolution of 12/21/2017 provided some additional funding to CHIP
 - Affects Public Health Prevention Fund monies
 - Hope for permanent funding solution 01/19/2018
- Letters were to be sent to ALL Kids families on 12/28/2017
 - 12/21/2017 CR has delayed that for now
- Without additional funding, CHIP (ALL Kids) will have to make hard decisions regarding enrollment and the future of the program

CHIP Status To-Date

- If there is additional funding the amounts and cost to state are unknown
- For FY16 and FY17 the program was fully funded by the Federal Government
 - If it is not fully funded, the state would need to cover the portion of CHIP not covered by Federal Funds
- Increase over the next fiscal years is due to elimination of 100% funding and slowly increasing the state share each fiscal year
- Information is not final until we hear more