

Background

TOTAL DPH FEDERAL GRANT AWARDS	
Total Number of Federal Grant Awards	97
Total Dollar Amount of Grant Awards	\$208 million
% of DPH Budget Represented by Grant Awards	56.49%
Total FTE's Supported by Grant Awards*	281.98
Total Bi-weekly Payroll for Federally Funded Staff	\$722,656
Total Bi-weekly Draw Down for Federal Grant Awards (includes Payroll)	\$4,572,110

*DPH staff in federally funded positions are covered by the terms of the current SEBAC Agreement.

- The Department of Public Health has 97 federal grant awards totaling approximately \$208 million for the current fiscal year. This represents approximately 56.49% of the Department's total annual budget.
- DPH currently employs 281.98 federally funded FTE's for a bi-weekly payroll totaling \$722,656.
- Federal funding is drawn down against letters of credit via two federal online payment management systems (ASAP – Automated Standard Applications for Payments and PMS – Payment Management System).
- Requests for funds made online using these systems result in wire transfers to DPH accounts (SID's) via the Office of the State Treasurer. Wire transfers are fully processed within 48 hours of the Department's request.
- DPH processes daily WIC (Women, Infants and Children) food reimbursement wire transfer requests. Other federal funding requests are made each Friday after payday.
- Letters of credit (or notices of grant awards) are supposed to be received by DPH prior to the beginning of the grant. For partially funded awards (i.e. awards made via a continuing resolution), letters of credit are usually received prior to the beginning of the grant quarter. It usually takes up to 4 weeks for the feds to process a letter of credit from the date that the Department receives notification that we will receive a grant award.
- In response to a potential federal shutdown, DPH has been proactively contacting the federal agencies that administer the grants that have outstanding letters of credit to request expedited processing of those letters.
- If the federal payment systems remain active during a federal shutdown then DPH will be able to continue to draw down on federal funds for those programs that have current letters of credit (notices of grant awards) on file. **Updated information from the Federal Government indicates that both payment systems will be operational during a shutdown. Assuming this is the case, additional funding will not be at risk, and**

there would be no expected disruption to additional programs and services funded by federal grant awards that have current letters of credit on file.

- In the event that circumstances change, and the federal payment systems become unavailable for cash draws, then there is a potential for the state to experience a profound impact to all federally funded public health programs and services during a protracted federal government shutdown. For many programs, the impacts would include disruption of services due to the state's inability to make payments against contractual obligations and to fund payroll for federal grant funded program positions.
- Of special concern is the state's Women, Infants and Children (WIC) program for which approximately 58,000 clients receive 220,000 food voucher checks each month totaling \$3.5 million in federal funds. For the WIC program, the Department makes food reimbursement wire transfer requests on a daily basis. The unavailability of the federal payment system utilized by the state would have an immediate impact on the state's ability to fund this program. Details regarding the impact and contingency plan are provided on page four of this document. **Updated information from the federal government indicates that the ASAP federal payment system will be available during a shutdown. DPH draws down on WIC funding through ASAP. Therefore, DPH does not anticipate any funding issues. The information on page four will show a worst case scenario, if conditions were to change.**

- **Women, Infants, and Children Program (WIC)**

Grant Name	Women, Infants, and Children
Grant SID	20892
Expected Award Date	October 1, 2013
Expected Award Amount	\$46,078,653
FTE's Supported By Award	19.95
Bi-Weekly Payroll For Staff	\$89,424
Payroll Obligations through December 31	\$590,196
Contractual Obligations through December 31	\$1,628,541
Total Projected Shortfall	\$2,218,737
Current Available Funds*	\$400,000
Shortfall Expected if Federal Funds Unavailable?	Yes. \$1,818,737

- Factors contributing to expected shortfall include payroll and contracts.
- Shortfall of \$1,818,737 expected through December 31, 2013.

Purpose: To address nutritional health needs of low income women, infants and children up to age 5 who are at nutritional risk by providing nutritious foods to supplement diets, information on healthy eating, and referrals to health care. Supplemental foods include special medical formula, standard infant formula, milk, eggs, bread and other nutritional foods specific to growth and development.

Impact:

- The WIC Program serves pregnant, breastfeeding and postpartum women, infants and children until their 5th birthday. Fifty-eight thousand clients receive services and food benefits each month. Therefore, we are estimating that these 58,000 clients would not receive services or food.
- Approximately 220,000 food benefit checks are issued each month totaling approximately \$3.5 million. Without drawdowns on federal money, the state would not have the funds to clear these checks.
- Grocery stores redeeming those checks will be charged returned check fees by their banks or the stores could choose not to provide the food to WIC clients.
- If funding were to cease due to the unavailability of the federal payment system, 24 WIC offices at the state and local level would shut down.

Plan:

- USDA has indicated that the DPH can continue to use the anticipated \$6m in unspent food monies from FY13 to continue to support continuity for the food program. This is expected to cover food expenses through December 2013.

- Based on the current available funding, DPH anticipates continuing operations of the Administrative component of the WIC program to support both DPH and Local Agency personnel costs through October 20, 2013 after which funds will not be available to support further payments to the Local Agencies as well as support payroll for DPH staff. DPH is proposing that the State provides funding to support expected shortfall under this grant until funds are made available by the federal government.
- At the State WIC Office, non-WIC funded State personnel would be deployed to staff the main WIC phone line to refer clients to food pantries, foodshare and other referral services as needed. Also, the DPH website would be updated listing the closed WIC sites and referral locations for food benefits and other referral needs.
- At the local WIC Sites, non-WIC funded State personnel would be deployed to the 12 full-time WIC sites to provide referral information on local area foodshare, food pantries and also other referral needs to WIC clients. Each local site is mandated to maintain referral listing for the needs of the clients.
- DPH would provide Infoline 211 with all the regional referral information to provide to clients.
- DPH would provide signage stating closure of the WIC sites and to call Infoline 211 for further information.
- DPH would also contact WIC vendors to inform them of the WIC Program shutdown until further notice.

Water Supply Supervision

Grant Name	Water Supply Supervision
Grant SID	20289
Expected Award Date	October 1, 2013
Expected Award Amount	\$1,371,000
FTE's Supported By Award	9.5
Bi-Weekly Payroll For Staff	\$44,621
Payroll Obligations through December 31	\$294,500
Contractual Obligations through December 31	\$0
Total Projected Shortfall	\$294,500
Current Available Funds*	\$0
Shortfall Expected if Federal Funds unavailable?	Yes. \$294,500

- Payroll is the single factor contributing to expected shortfall.
- Shortfall of \$294,500 expected through December 31, 2013.
- Funds drawn down through ASAP, this is expected to remain operational during a federal shutdown.

Purpose: This grant enables the Drinking Water Section to enforce and implement Federal and State drinking water regulations. Provides funding for staff to ensure routine monitoring of all public water supplies is maintained. Staff responds to violations, takes enforcement actions as needed and implements immediate measures to protect public health.

Impact: Federal shutdown will impact the state's ability to receive guidance and technical assistance from EPA staff. A shutdown may impact utilization of carryover funds and requests to re-budget federal funds. The public and regulated public water suppliers call the Drinking Water Section with matters concerning water quality and if service interruptions occur during a shutdown, calls will be routed to an automated telephone triage system and directed to appropriate staff for follow-up. Response times to investigate complaints will increase. Callers may experience frustration with delays in speaking directly with someone who can assist them. There is also the potential for delayed ability to identify contaminants in drinking water and/or to seek remedy for service interruptions or water shortages. Routine surveys of the sanitary conditions surrounding public water supply sources will be delayed from 5 years, to 5.5 years or longer. The aggregate impact will result in a less robust drinking water protection program. Resources will focus on responding to critical system failures or quality issues affecting the largest groups of consumers. Consumers with service from smaller systems will experience reduced service and response, potentially leading to missed compliance monitoring of systems.

Plan: DPH is proposing that the State provides funding to support shortfall in payroll expenditures for the staff positions funded under this grant until funds are made available by the federal government. Without funding for salaries beyond January 1st, sanitary survey inspections would be halted, routine monitoring eliminated, and there would be a reduced ability to take

consumer complaints through support staff. The Department would utilize professional organizations and inter-state workgroups for technical assistance where needed.

Clinical Lab Improvement Amendment

Grant Name	Clinical Lab Improvement Amendment
Grant SID	21011
Expected Award Date	October 1, 2013
Expected Award Amount	\$256,231
FTE's Supported By Award	2
Bi-Weekly Payroll For Staff	\$8,017
Payroll Obligations through December 31	\$52,913
Contractual Obligations through December 31	\$0
Total Projected Shortfall	\$52,913
Current Available Funds*	\$0
Shortfall Expected if Federal Funds Unavailable?	Yes. \$52,913

- Payroll is the single factor contributing to expected shortfall.
- Shortfall of \$52,913 expected through December 31, 2013.

Purpose: This grant supports the inspections of the state’s medical facilities such as hospitals, surgical centers and dialysis units. It also partially funds nursing home inspections.

Impact: There will be no impact on patients of health care facilities. Federal inspection activities will continue initially without interruption. In the event of any need to curtail activities, the Department would cease routine inspections, but continue to investigate complaints that alleged serious threats to patient health or safety.

Plan: If the shutdown is prolonged, State-Only inspections of healthcare facilities will continue in order to prevent any lack of oversight. CMS maintains its workload expectations of the states, regardless of a continuing resolution or government shutdown. DPH will continue to conduct federal inspection activities, because the health and safety of citizens could be at risk, as long as possible under State-Only authority.

Medical Facilities Certification

Grant Name	Medical Facilities Certification
Grant SID	20833
Expected Award Date	October 1, 2013
Expected Award Amount	\$5,712,000
FTE's Supported By Award	37
Bi-Weekly Payroll For Staff	\$175,924
Payroll Obligations through December 31	\$1,161,095
Contractual Obligations through December 31	\$0
Total Projected Shortfall	\$1,161,095
Current Available Funds*	\$0
Shortfall Expected if Federal Funds Unavailable?	Yes. \$1,161,095

- Payroll is the single factor contributing to expected shortfall.
- Shortfall of \$1,161,095 expected through December 31, 2013.

Purpose: This grant supports the inspections of the state's medical facilities such as hospitals, surgical centers and dialysis units. It also partially funds nursing home inspections.

Impact: There will be no impact on patients of health care facilities. Federal inspection activities will continue initially without interruption. In the event of any need to curtail activities, the Department would cease routine inspections, but continue to investigate complaints that alleged serious threats to patient health or safety.

Plan: If the shutdown is prolonged, State-Only inspections of healthcare facilities will continue in order to prevent any lack of oversight. CMS maintains its workload expectations of the states, regardless of a continuing resolution or government shutdown. DPH will continue to conduct federal inspection activities, because the health and safety of citizens could be at risk, as long as possible under State-Only authority.

Maternal and Child Health Block Grant

Grant Name	Maternal and Child Health Block Grant
Grant SID	21531
Expected Award Date	October 1, 2013
Expected Award Amount	\$4,431,905
FTE's Supported By Award	21.36
Bi-Weekly Payroll For Staff	\$105,570
Payroll Obligations through December 31	\$696,762
Contractual Obligations through December 31	\$202,208
Total Projected Shortfall	\$898,970
Current Available Funds*	\$1,087,721
Shortfall Expected if Federal Funds Unavailable?	Yes. \$0

- Factors contributing to expected shortfall include payroll and contracts.
- FY 14 Shortfall of \$898,970, through December 31, 2013 will be temporarily drawn down using FY 13 available federal funds until FY 14 funds are available in PMS which is expected to remain operational during a federal shutdown.

Purpose: The Maternal and Child Health Block Grant (MCHBG) Title V fund is designed to provide quality maternal and child health services for mothers, children and adolescents (particularly of low income families), to reduce infant mortality and the incidence of handicapping conditions among children, provide and ensure access to comprehensive care for women, and promote the health of children by providing preventative and primary care services. The MCHBG is also designed to facilitate the development of comprehensive, family-centered, community-based, culturally competent, coordinated systems of care for children with special health care needs (CYSHCN).

Impact:

- The MCHBG serves pregnant women, infants and children (including children and youth with special health care needs). We anticipate that approximately 151,000 individuals would not receive services.
- This could create a “wait list” for these populations and delays in receiving services.
- Programs that provide services to clients that might be impacted include: Info line 2-1-1, Family Planning (Planned Parenthood), School Based Health Centers, State Healthy Start Program, Care Coordination services for children and youth with special health care needs, and genetic services.

Plan:

- DPH intends to cover the expected shortfall of \$898,970 through December 31, 2013 by temporarily utilizing FY13 available federal funds until FY14 funds are available. In the event that the federal shutdown persists beyond December 31, 2013, DPH will review the criticality and performance of the programs funded by the MCHBG so as to prioritize those programs deemed most critical to the public.

Preventive Health Block Grant

Grant Name	Preventive Health Block Grant
Grant SID	21530
Expected Award Date	October 1, 2013
Expected Award Amount	\$1,019,807
FTE's Supported By Award	0.25
Bi-Weekly Payroll For Staff	\$1,486
Payroll Obligations through December 31	\$9,806
Contractual Obligations through December 31	\$0
Total Projected Shortfall	\$9,806
Current Available Funds*	\$439,589
Shortfall Expected if Federal Funds Unavailable?	Yes. \$0

- Factors contributing to expected shortfall include payroll and contracts.
- FY 14 Shortfall of \$9,806, through December 31, 2013 will be temporarily drawn down using FY 13 available federal funds until FY 14 funds are available in PMS which is expected to remain operational during a federal shutdown.

Purpose: The Preventive Health and Human Services Block (PHHSBG) provide funds for the provision of a variety of public health services including Intimate Partner Violence (IPV) Prevention Program, Rape Crisis Services program, cancer, cardiovascular disease, injury prevention, chronic disease self-management, healthy homes and surveillance monitoring designed to reduce preventable morbidity and mortality, and to improve the health status of targeted populations.

Impact:

- Funding will not be immediately available to continue to support a 0.25FTE dedicated staff position that administers the grant. Programmatic activities, such as payment of fees for legal notices to announce mandated public hearings and support for meetings of the PHHSBG will be delayed until federal funds becomes available.

Plan:

- DPH intends to cover the expected shortfall of \$9,806, through December 31, 2013 by temporarily using FY13 available federal funds until FY 14 funds are available.

Sexual Violence Prevention and Education

Grant Name	Sexual Violence Prevention and Education
Grant SID	20828
Expected Award Date	November 1, 2013
Expected Award Amount	\$420,485
FTE's Supported By Award	0.67
Bi-Weekly Payroll For Staff	\$3,498
Payroll Obligations through December 31	\$15,042
Contractual Obligations through December 31	\$0
Total Projected Shortfall	\$15,042
Current Available Funds*	\$0
Shortfall Expected if Federal Funds Unavailable?	Yes. \$15,042

- Factors contributing to expected shortfall include payroll and contracts.
- Shortfall of \$15,042 through December 31, 2013.

Purpose: Sexual violence prevention and education, training to health care providers, schools, law enforcement, social services providers, and the community regarding sexual violence prevention.

Impact:

- Funding will not be immediately available to continue to support a 0.67FTE dedicated staff position that administers the grant. DPH anticipates that approximately 220 individuals would not receive sexual violence prevention services or training. Funds will not be available to support payment to CONNSACS, the contractor that provides services under the grant.

Plan:

- DPH is proposing that the State provide funding to support shortfall in payroll expenditures for the staff position funded under this grant until funds are made available by the federal government.

Viral Hepatitis Prevention and Surveillance

Grant Name	Viral Hepatitis Prevention and Surveillance
Grant SID	22566
Expected Award Date	November 1, 2013
Expected Award Amount	\$231,600
FTE's Supported By Award	1
Bi-Weekly Payroll For Staff	\$5,933
Payroll Obligations through December 31	\$25,513
Contractual Obligations through December 31	\$0
Total Projected Shortfall	\$25,513
Current Available Funds*	\$0
Shortfall Expected if Federal Funds Unavailable?	Yes. \$25,513

- Payroll is the single factor contributing to expected shortfall.
- Shortfall of \$25,513 through December 31, 2013.

Purpose:

- To address the Connecticut state-wide viral hepatitis public health needs through the coordinator of education, early detection and screening, linkage to care and treatment; by integrating activities into current services and systems; and, by direct interaction/education with medical providers, public health professionals, our communities and affected populations.

Impact:

- Funding will not be immediately available to continue to support a 1 FTE dedicated staff position that administers the grant. This will impact DPH's ability to facilitate education, screening, testing, linkage to care and treatment and the implementation of newly released (2013) guidelines by the United States Preventative Service Task Force (USPSTF), CDC and HRSA including efforts with many health care sites and providers such as primary care providers, community health centers and STD clinics as well as promote hepatitis awareness and education in communities and with persons at risk who are aware and unaware of their hepatitis C infection.

Plan:

- DPH is proposing that the State provide funding to support shortfall in payroll expenditures for the staff position funded under this grant until funds are made available by the federal government.

Additional Programmatic Considerations

Public Health Laboratory Services

In the event that the Centers for Disease Control and Prevention (CDC) were to stop providing critical state public health laboratory support services during a federal shutdown, DPH would be impacted as follows:

Impact: Loss of critical consultation services provided by the CDC.

Plan: Secure consultation services from other experts within the state and region.

Impact: Interruption of CDC provided supplies and reagents for bioterrorism, chemical terrorism and influenza sample testing.

Plan: Utilize conventional microbiology testing methods of samples. Although effective, these methods require additional time to yield results.

Public Health Initiatives

Impact: CDC Project Officers or Grants Specialists may not be available to provide technical assistance to DPH or its contractors and may not be available to process certain applications, for example:

- a) The approval of National Health Service Corps applications may not be processed or approved at the federal level. This could impact health care providers who want to provide services in underserved areas, such as Community Health Centers.

Impact: Reporting abilities to CDC may be limited, for example:

- a) Access to the CDC Secure Data Network (SDN) to enter data from our CDC funded HIV Prevention programs for two HIV Prevention grants.
- b) Access to the CDC Evaluation Web consultants who are handling the transition of our HIV testing data from the old CDC Program Evaluation and Monitoring system to the new Evaluation Web system.

Plan: DPH is working with CDC Project Officers and Grants Specialists to discuss strategies that address the need for technical assistance and reporting requirements.

Impact: Currently, the CDC has two (2) federal employees on assignment at the DPH in the following service areas: infectious disease surveillance and immunizations. During a federal shutdown, the immunization individuals may be furloughed by the federal government for the duration of the shutdown.

Plan: DPH staff are cross trained in many aspects of the programs that CDC employees currently oversee and would be able to provide coverage should the federal government shutdown.

Contractual Considerations

The Department has the ability under current standard contractual terms and conditions to reduce the compensation or payments for any program due to the unavailability or reduction of federal funds. The Department is required to give the Contractor written notice of any reductions in compensation or payments.

Continuity of Operations Plan (COOP)

As with all state agencies, the Department of Public Health was mandated to create a Continuity of Operations Plan to address emergency situations when staffing reductions may occur and agency priority functions cannot be completed. Utilizing the Department's Incident Command System, the plan includes agency functions by priority, and a communication plan for communicating within the agency, Governor's office, DAS and the public in the event the Department's priority functions are discontinued. Based on the current 2009 SEBAC agreement, the Department does not project an absenteeism rate due to a protracted federal shutdown (through December 2013) that will require the activation of the Department's COOP.