

Approved: February 14, 2000  
Date

## MINUTES OF THE SENATE WAYS & MEANS COMMITTEE.

The meeting was called to order by Chairperson Dave Kerr at 11:00 a.m. on February 10, 2000 in Room 123-S of the Capitol.

All members were present except:

Committee staff present: Alan Conroy, Chief Fiscal Analyst, KLRD  
Rae Anne Davis, KS Legislative Research Department  
Debra Hollon, KS Legislative Research Department  
Norman Furse, Revisor of Statutes  
Michael Corrigan, Asst. Revisor of Statutes  
Judy Bromich, Administrative Assistant to the Chairman  
Ronda Miller, Committee Secretary

Conferees appearing before the committee:

Secretary Janet Schalansky, Department of Social and Rehabilitation Services  
Dr. Michael Moser, Director, Department of Health & Environment  
Carol Williams, Director, Governmental Ethics Commission  
Duane Goossen, Director, Division of the Budget

Others attending: See attached list

The Chairman announced that today's meeting would constitute the official hearing as required by federal law with respect to the Department of Social and Rehabilitation Services Federal Block Grants and with respect to the Department of Health and Environment Federal Block Grants. He called the hearing on the Department of Social and Rehabilitation Services Federal Block Grants to order.

Secretary Janet Schalansky, SRS, reviewed the individual federal block grant programs and the amount of federal dollars appropriated for them in FY 2001. (Attachment 1) There was discussion about how the Projects for Assistance in Transition from Homelessness grants differ (in funding source and targeted groups of population) from the homeless grants that were reported as "unavailable" in the press. Concern was expressed that the individual mental health centers are not being held accountable for how the federal block grant monies are expended. Secretary Schalansky stated that the centers provide expenditure reports and she would check with quality assurance staff to see if those reports are reviewed. Senator Ranson told members that a Post Audit study on the delivery and funding of mental health services is being conducted and the goal is to track individual streams of money and the results. She stated that the report is due the end of March. There was some discussion about the profile of the homeless person and how communities define the level of services that are needed.

There was discussion regarding the funding level for the block grants in comparison to prior years. The Secretary did not address the Mental Health Services Block Grant, but stated that funding for all the other block grants had either remained flat or had been decreased with the exception of the LIEAP block grant, which increased last year because of weather conditions. Concern was expressed about administrative costs of the Social Services Block Grant at the state and local levels.

It was asked that the Secretary elaborate on the substance abuse programs. Secretary Schalansky stated that Kansas State University measures treatment outcomes using an addiction severity index. The results of the study show a slight improvement, but the Secretary noted that conclusions of the study may not be accurate because follow-up is voluntary and the scope of the study is small. In response to a concern, the Secretary stated that a Senate Concurrent Resolution asks that the Governor's Substance Abuse Prevention Council provide more information about the success of substance abuse programs.

The Chairman called the hearing on the Department of Health and Environment Federal Block Grants to order and welcomed the new Director of the Division of Health, Dr. Michael Moser.

CONTINUATION SHEET

SENATE WAYS & MEANS COMMITTEE MINUTES

Dr. Moser distributed and briefly reviewed copies of his written testimony which outlined The Preventive Health and Health Services (PH) Block Grant and The Maternal and Child Health Services (MCH) Block Grant (Attachment 2). In answer to questions, Dr. Moser explained how the grant monies are dispersed and referred to charts in his written testimony. (Attachment 2-7 & 8) In answer to a question, Cassie Lauver of the Bureau of Children, Youth & Families, stated that staff goes to the counties to monitor and assure that services are being provided.

The Chairman asked if anyone in the audience would like to address any of the Federal Block Grants. There were no other conferees, and the Chairman declared the hearings closed.

**SB 481: Governmental ethics commission; biennial budget**

Deb Hollon, KLRD, explained that **SB 481** adds the Governmental Ethics Commission to the list of agencies that submit budget estimates on a biennial basis.

Carol Williams, Director, Governmental Ethics Commission, appeared before the Committee and reviewed her written testimony in support of **SB 481**. (Attachment 3) It was noted that the agency's first biennial budget would be for FY 2002-2003.

Duane Goossen, Director, Division of the Budget, appeared before the Committee and told members that currently 23 agencies have biennial budgets and those are working well. He noted that adding this agency to the list of biennially budgeted agencies crosses a policy line because this agency has partial SGF funding. He cautioned the Committee that the switch from annual to biennial is not as simple as this suggests and should not be done without thorough investigation.

Senator Morris moved, Senator Salisbury seconded, that SB 481 be recommended favorably for passage. The motion carried on a roll call vote.

It was moved by Senator Petty and seconded by Senator Salisbury that bill draft 9rs 1962 as requested by Senator Petty be introduced. The motion carried on a voice vote.

Senator Feleciano moved, Senator Salisbury seconded that bill draft 9rs 1812 as requested by SRS be introduced. The motion carried on a voice vote.

A motion was made by Senator Salisbury and seconded by Senator Jordan that the minutes of the February 7 & 8 meetings be approved. The motion carried on a voice vote.

A tabulation of the ending balances in the EDIF for FY 2000 and FY 2001, compiled by the Kansas Legislative Research Department, was distributed to members. (Attachment 4)

The Chairman adjourned the meeting at 12:10 p.m. The next meeting will be held February 11, 2000.

# SENATE WAYS & MEANS COMMITTEE GUEST LIST

DATE: February 10, 2000

NAME	REPRESENTING
Julie Hepmas	DOB
Bill Renny	Ks Governmental Consulting
Carl Williams	Governmental Ethics Center
MARK SALMONS	—
Laura Howard	SRS
Jo Scott	STRS
Lisa Becker	SRS
Nora Smith	Intern - Sen. Felecciano
Julie Hein	Hein + Wear
Bill Brady	Ks Gov't Consulting
Dodie Weushear Johnson	Ks Action for Children
Therese Barget	KS. CATHOLIC CONFERENCE
Imy White	Page for Sen. Kerr
Mindy Klausner	Page for Sen. Kerr
Steven Coonce	Page for Sen. Kerr
Best Love	KAPS
Randy Skout	FTE - Midwest



State of Kansas  
Department of Social  
and Rehabilitation  
Services

Janet Schalansky, Secretary

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**Senate Ways and Means Committee**  
February 10, 2000

**FY 2001 Federal Block Grants**

**Office of the Secretary**  
**Janet Schalansky, Secretary**  
**785-296-3271**

Senate Ways and Means Committee

Date *February 10, 2000*

Attachment #

*1*

**Kansas Department of Social and Rehabilitation Services  
Janet Schalansky, Secretary**

**Senate Ways and Means Committee  
February 10, 2000**

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**Kansas Department of Social and Rehabilitation Service  
Janet Schalansky, Secretary**

**Senate Ways and Means Committee  
FY 2001 Federal Block Grants**

February 10, 2000

Mr. Chairman and members of the Committee, thank you for holding this federally required hearing and the opportunity to provide you information on the Federal Block Grant programs administered by the Department of Social and Rehabilitation Services.

Included is summary information on the following individual federal block grant programs:

- Social Services Block Grant (SSBG)
- Block Grant for the Prevention and Treatment of Substance Abuse
- Community Mental Health Services Block Grant
- Low Income Energy Assistance Block Grant (LIEAP)
- Projects for Assistance in Transition from Homelessness Block Grant (PATH)

<b>Federal Block Grants</b>	<b>Block Grant Amount</b>
Social Services	\$ 28,351,705
Substance Abuse	\$ 10,978,786
Mental Health	\$ 2,370,291
LIEAP	\$ 8,308,014
PATH	\$ 300,000
<b>Grand Total</b>	<b>\$ 50,308,796</b>

The total amount of federal dollars appropriated for these block grant programs is over \$50 million in FY 2001, if not otherwise adjusted by Congress. Our total federal funding, in all programs, is nearly \$952 million. These block grants account for only five percent of our federal funding.



■ **SUMMARY REPORT ON THE PROPOSED USE OF THE KANSAS SOCIAL SERVICE BLOCK GRANT - JULY 1, 2000 TO JUNE 30, 2001**

The Department of Social and Rehabilitation Services formulates and carries out a program of social services designed to protect children and promote adult self sufficiency. The Social Services Block Grant supports these services. This is the twentieth year of the social services block grant program.

**Eligibility and Requirements**

Individual eligibility for social service block grant funding is based on two criteria: 1) personal need; and 2) financial need.

Personal need is based on one of the five national goals: 1) helping individuals to become economically self-supporting; 2) helping individuals to reduce dependency and become self-sufficient; 3) providing protective services for those in need (regardless of income); 4) providing services to help persons to remain in their own homes; and 5) when no other alternatives exist, providing services to help persons receive the most appropriate institutional care (i.e., adult care homes, state institutions, private institutions, etc.).

Financial need is based upon an individual's income based on the state's established maximum income level (150percent of the federally established poverty guideline). A single individual may not have a gross income exceeding \$1,030 per month. This scale is graduated upward according to family size.

For FY 2001, the Kansas Social Service Block Grant Program amount is \$28,351,705. The estimated expenditures are as follows:

Type of Service	Amount
Adoption Services	\$ 7,379,614
Field Operations	\$ 5,883,024
Adult Day & Community Living Grants - MHDD	\$ 10,591,694
Child Care	\$ 4,337,000
Adult & Medical -Independent Living	\$ 160,373
<b>TOTAL</b>	<b>\$ 28,351,705</b>

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The social services block grant funds will continue to be used on a statewide basis to purchase services, to fund direct grants, and to provide direct services by SRS employees.

The Kansas social services block grant plan will be presented at an open meeting May 11, 2000 and a thirty day public comment period will follow. The plan is to be adopted by the Secretary of SRS in June and submitted to the federal government later that month.



■ **SUMMARY REPORT ON THE PROPOSED USE OF THE BLOCK GRANT FOR THE PREVENTION AND TREATMENT OF SUBSTANCE ABUSE - JULY 1, 2000 TO JUNE 30, 2001**

The Block Grant for the Prevention and Treatment of Substance Abuse is authorized by Public Law 102-321. The current estimate of Kansas' share of the Block Grant is \$10,978,786. The funds will be utilized as indicated below:

Services	Funding Amount
Administration	\$ 481,118
Substance Abuse Prevention Services	\$ 2,390,804
Substance Abuse Treatment Services	\$ 8,106,864
<b>TOTAL</b>	<b>\$ 10,978,786</b>

In our prevention efforts, SRS utilizes a regional approach. Within each of the regions, or SRS Management Areas, high risk data concerning families, youth, and schools is used to target prevention services to communities with high risk factors for substance abuse.

Our treatment approach is to fund programs that provide the least restrictive environment for recovery from alcohol and other drug addictions. The use of five regional assessment centers to accurately assess the level of care needed for each client is allowing the client to receive the most appropriate and cost effective form of treatment available to the majority of Kansans. Priority populations served are pregnant women, women with children, anyone who has been exposed to or is at high risk for TB and/or HIV, and lastly, those who would not be able to afford treatment otherwise. While clinically sound treatment for all who seek those services is our goal, we also place great emphasis on treatment outcomes and improvement in the delivery system. Treatment services funded by the Block Grant for the Prevention and Treatment of Substance Abuse are projected to provide services for over 18,000 persons who seek treatment. In addition, our prevention centers are projected to reach over one million persons during FY 2000.

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■ **SUMMARY REPORT ON THE PROPOSED USE OF THE COMMUNITY MENTAL HEALTH SERVICES BLOCK GRANT - JULY 1, 2000 TO JUNE 30, 2001**

**Funding:** For FY 2001 Mental Health and Developmental Disabilities (MHDD) will receive \$2,370,291 under this grant.

**Distribution:** Less than 5percent is allocated to the central office administration. The balance of \$2,258,210 is distributed via a performance based system of contracting to the 27 Community Mental Health Centers(CMHCs).

CMHCs funded under these contracts provide an organized and comprehensive community-based system of supports and services for individuals with severe and persistent mental illness and for children with serious emotional disturbances. CMHCs have a combined staff of over 2,000 and provide mental health services to every county in the state. These independent and locally-operated centers foster a quality system of services for the benefit of citizens needing mental health care and treatment.

A array of services based on an individual's strengths and needs are provided. Basic services provided are outpatient, 24-hour emergency services, consultation and education, screening and aftercare. These services are complemented by a variety of specialized services for targeted populations. Some of these special services are:

- Attendant Care
- Respite Care
- In-Home Family Therapy
- Drop-In Services for persons with severe and persistent mental illness
- Vocational Services for persons with severe and persistent mental illness
- Homeless Projects
- Preschool Day Treatment Programs
- Children's Day Hospital
- Parent Education Classes
- Assertive Outreach
- Case Management
- Psycho social Rehabilitation

■ **SUMMARY REPORT ON THE PROPOSED USE OF THE LOW INCOME ENERGY ASSISTANCE PROGRAM (LIEAP) BLOCK GRANT JULY 1, 2000 TO JUNE 30, 2001**

The federally funded Low Income Home Energy Assistance Program (LIEAP) Block Grant helps households pay energy costs. The 2001 Kansas allocation is \$8.3 million. Assuming stable funding, SRS proposes continuing grant utilization in the following manner:

1. **Energy Assistance** (85percent of the grant) - Utility or fuel assistance is provided to qualifying households whose income is under 130percent of poverty. For a one-person household, the income limit is \$893 monthly. Last year, the *average* income of one-person recipient households was \$547 monthly, or 81percent of the poverty level. At this level, households typically have difficulty paying for basic living costs such as housing, fuel, utilities, food, and medicine. Their vulnerability is worsened by medical conditions, disabilities and other problems. Most LIEAP recipients are older persons with "low-end" Social Security benefits, single parent families living on the minimum wage, or disabled individuals.

As a condition of eligibility, applicants must also demonstrate recent utility payments. This state-added requirement emphasizes the household's responsibility for paying its own fuel costs, promotes and importance of maintaining a regular payment history, and provides positive reinforcement. By supplementing the household's own payments, LIEAP helps elderly and disabled persons continue to stay in their homes, and protects vulnerable families who are at risk.

Applications are mailed to targeted groups of individuals who may need assistance. Completed applications may be mailed without need to visit the SRS Office. About 300 volunteer organizations help distribute outreach information to households who are unaware of the assistance. SRS verifies income by accessing data bases e.g., Social Security, workman's compensation and other systems.

Once the household is determined eligible, benefits are applied to the household's fuel or utility account to ensure that the benefit is used for energy purchases. Benefit levels vary according to household income and size, fuel type, dwelling type, and the household's utility rates. The recipient may split the benefit between two vendors (e.g., natural gas, electric, propane, or wood vendors).

About 25,500 households are expected to receive assistance in 2001 with a projected annual benefit averaging \$389.

2. **Weatherization Assistance** (15percent of the grant) - Federal regulations allow States to use up to 15percent of the LIEAP grant for weatherization improvements. If funding permits, the Department proposes transferring the maximum allowed level to the Department of Commerce and Housing to supplement the Weatherization Program.

■ **SUMMARY REPORT ON THE PROPOSED USE OF THE BLOCK GRANT FOR PROJECTS FOR ASSISTANCE IN TRANSITION FROM HOMELESSNESS (PATH) - JULY 1, 2000 TO JUNE 30, 2001**

**Funding:** Kansas is a minimum allotment state under this federal formula grant program. \$300,000 has been received for each of the last seven years.

**Distribution:** All funds are distributed to homeless programs at five mental health centers. The allocations are as follows:

Shawnee CMHC	-	\$109,981
ComCare	-	\$ 95,306
Wyandotte CMHC	-	\$ 40,113
Bert Nash MHC	-	\$ 26,600
Franklin County MHC-		\$ 28,000
<b>TOTAL</b>		<b>\$300,000</b>

**SHAWNEE County CMHC, COMCARE (Sedgwick County):** PATH block grant funds at these centers allow staff to provide outreach and case management services to persons who are homeless and mentally ill. Case managers help people secure transitional and permanent housing, health services, and mental health and substance abuse services in appropriate cases.

**WYANDOTTE County CMHC:** Services provided with PATH funds at this mental health center are similar to those provided in Shawnee and Sedgwick County.

**FRANKLIN County CMHC, BERT NASH (Douglas County):** Both of these centers provide outreach case management and work to link homeless persons with health, mental health and substance abuse services. Case management assists persons with transitional and permanent housing and vocational services.



**KANSAS**  
**DEPARTMENT OF HEALTH & ENVIRONMENT**  
BILL GRAVES, GOVERNOR  
Clyde D. Graeber, Secretary

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Testimony presented to

SENATE WAYS AND MEANS COMMITTEE  
LEGISLATIVE HEARING

PREVENTIVE HEALTH AND HEALTH SERVICES BLOCK GRANT  
MATERNAL AND CHILD HEALTH SERVICES BLOCK GRANT

presented by

The Kansas Department of Health and Environment

February 10, 2000

In the early 1980's, the federal block grant programs were initiated in order to provide states greater flexibility in administering federal funding to provide needed services. Funding from a number of programs was consolidated into block grants to provide centralized administrative oversight. The Kansas Department of Health and Environment was awarded two federal block grants, the Preventive Health and Health Services Block Grant (PH) and the Maternal and Child Health Services Block Grant (MCH). By federal regulation, public hearings are required for both Block grants. This hearing meets public review and comment requirements for these grant programs for public input into expenditure of block grant funds toward priority state health needs.

**The Preventive Health and Health Services Block Grant**

The block grant supports preventive health programs and services that address **preventable** health problems that contribute to the state's leading causes of premature death and disability and that are consistent with the Year 2000 Health Objectives for the nation. The 1992 amendment to Title XIX, Part A, of the PHS Act significantly changed both the application process and reporting requirements in order to better respond to the National Objectives. Beginning with the fiscal year 1993 application, KDHE responded to the new requirements by:

- Facilitating a process to identify preventable health priorities for Kansas that are compatible with national priorities. The initial Healthy Kansans Planning process identified seven (7) priority health areas for Kansas, including target population for which activities are to be carried out, population

with greater need and strategies for implementation;

- Providing a description of the programs and projects that are funded with PHHS block grant and estimate the number of individuals to be served;
- Establishing a state preventive health advisory committee, chaired by the state health officer, to make recommendations regarding development, implementation of the state plan, and holding public hearings on the state plan as stipulated by law;
- Establishing an ongoing process for public review and comment;
- Measuring progress towards meeting the state preventive health objectives, including developing the necessary surveillance systems for measuring progress towards meeting the state's objectives and submission of required uniform data items.

The revised law stipulates that the state use funds to supplement and increase the level of state, local and other non-federal funds and will not supplant other non-federal funds. State expenditures for activities should be maintained at a level that is not less than the average level of such expenditures maintained by the state for the two year period preceding the fiscal year for which the state is applying.

Section 1904 of the revised law stipulates that funds may be used for the following:

- Activities consistent with making progress toward achieving the Year 2000 Health Objectives for the health status of the population;
- Preventive health service programs for the control of rodents and for community and school based fluoridation programs;
- Feasibility studies and planning for emergency medical services systems and the establishment, expansion, and improvement of such systems;
- Providing services to victims of sex offenses and for prevention of sex offenses;
- Program activities related to planning, administration and education, including monitoring evaluation of the Year 2000 Health Objectives addressed in the state plan.

A state may not use the funds to :

- a) Provide inpatient services;
- b) Make cash payments to intended recipients of health services;
- c) Purchase or improve land, purchase, construct, or permanently improve any building or

- other facility, or purchase major medical equipment;
- d) Satisfy any requirement for the expenditure of non-federal funds as a condition for the receipt of federal funds; or,
- e) Provide financial assistance to any entity other than a public or non-profit private entity.

### **The Maternal and Child Health Services (MCH) Block Grant**

Title V of the Social Security Act supports activities to improve the health of all mothers and children, including Children with Special Health Care Needs, consistent with applicable national goals and objectives established under the U.S. Public Health Services Act for the Year 2000. In 1989, Congress adopted the Omnibus Budget Reconciliation Act (OBRA '89) which contained a number of important amendments affecting access to comprehensive health care for women and children, including children with special health care needs.

Those amendments consisted of new requirements for states in planning, service delivery and reporting. Specifically, the changes were designed to improve planning and accountability, targeting federal funds to priority populations and explicitly linking Title V Maternal and Child Health to applicable goals and objectives for the Year 2000. Kansas is currently in compliance with these amendments.

Funds are allocated to Kansas by a block grant formula enabling the State to:

- Provide and assure mothers and children (particularly those with low income or with limited access to services) access to quality maternal and child health services;
- Reduce infant mortality and the incidence of preventable disease and handicapping conditions among children;
- Reduce the need for inpatient and long-term care services;
- Increase the number of children (especially preschool children) appropriately immunized against disease and the number of low income children receiving health assessments and follow-up diagnostic and treatment services;
- Promote the health of mothers and infants by providing prenatal, delivery, and postpartum care for low-income, at-risk pregnant women;
- Promote the health of children by providing preventive and primary care services for low-income children;
- Provide rehabilitation services for blind and disabled individuals under the age of 16 receiving benefits under Title XVI (of the Social Security Act), to the extent medical assistance for such services is not provided under Title XIX; and,



- Provide and promote family-centered, community based, coordinated care (including care coordination services) and facilitate the development of community-based systems of service for children with special health care needs and their families.

The MCH block application process has been changed to include a Performance Measurement System. Starting in FY 99, the MCH Block Grant application process responds to the Government Performance and Results Act (GPRA), a government-wide effort to establish measurable performance goals and linking funding decisions to performance. The grant application process includes state accountability within the flexibility of state-identified needs and solutions. States must report progress on key maternal and child health indicators along with other program information.

A key function for MCH in each state is identification and prioritization of the key problems and issues for the maternal and child health population and specific subgroups. A needs assessment, which identifies and prioritizes major MCH problems, is required by the Title V legislation and each state must conduct one every five years. The next needs assessment is due July 15, 2000. Assessment includes:

- Documentation through quantitative and qualitative data of the mortality and morbidities facing the overall population and subgroups within;
- Diagnosis of the problems' causes or associative factors; and
- Proposed population-based solutions.

After determining a state's priorities, resources are allocated to activities that address the priorities. Activities are categorized by four levels of service: basic, enabling, population-based and capacity/infrastructure services. The collective efforts of all MCH state and local programs in the state should have a contributory effect of positively impacting Kansas MCH health outcomes. This effect is measured by the performance measures. Health outcomes measure the end result or impact of programs or interventions (e.g., decrease in infant mortality rates).

#### **DESCRIPTION OF SERVICES TO BE FUNDED IN FY 2000:**

##### Aid to Local Agencies:

MCH, PH, and SGF - The Maternal and Child Health Grants - All 105 Kansas counties provide maternal and child health services to optimize the health of Kansas families, in particular for uninsured families and those with limited access to care. Counties must provide comprehensive services by coordinating with all available community resources. Based on a community health assessment, counties provide services, including prenatal care coordination (M&I), home visiting (Healthy Start), child health assessments, and others. Up to 30 percent of the funding is flexible to be used on these and other locally identified MCH

priorities.

PH - Chronic Disease Risk Reduction - Grants are awarded to support development and implementation of community-based programs to decrease premature death and disability due to cancer and cardiovascular disease, the two leading causes of death in Kansas. Program interventions are designed to decrease the leading modifiable risk factors for cancer and cardiovascular disease, including tobacco use, physical inactivity, and nutrition. Currently, 40 counties, representing over 70 percent of the state's population are included in the program. Interventions are delivered through schools, work sites, churches, community organizations and in other community settings.

MCH, PH, and SGF - Five adolescent health projects provide school-linked primary care and residential maternity home care for teens. Projects focus on high risk adolescent health issues. In the case of the maternity homes (funded solely with state general funds), the focus is repeat pregnancy prevention.

MCH and SGF - The Black Infant Mortality project in Wichita and the Black Family Preservation project in Kansas City provide community, group and individual education to adolescents and their parents about the consequences of too early childbearing by black youth.

PH - Health Prevention projects fund specific services based on identified need. Funds will be awarded to Pittsburg State University for facilitation of a statewide initiative to promote physical activity and a Black Churches Hypertension/Cholesterol reduction project in Sedgwick County.

#### **Transfers of PH Funding to Other State Agencies:**

PH - A portion of PH funding to Kansas is designated, per federal mandate, for rape prevention education and programming and is transferred to the Attorney General's Office to be used for local programs. The allocation to Kansas is used exclusively for rape prevention education as stipulated via the authorizing legislation.

#### **State Operations:**

MCH - Data processing costs for data reports related to maternal and child health services.

MCH - Portion of operating expenses for Vital Statistics, providing health status indicators related to maternal and child health.

MCH - Portion of operating expenses for Child Care Facilities Licensure and Registration program.

MCH - Operating expenses for Services for Children with Special Health Care Needs Section to include direct provider payments for medical specialty services for children with disabling conditions.

MCH - Minor portion of operating expenses for Nutrition and WIC Services Section to develop nutrition

resources and services that contribute to the prevention and correction of health problems related to nutrition for women, infants and children.

MCH - Portion of operating expenses for Children and Families Section to provide program oversight to local agencies providing maternal and child health services.

MCH - Minor portion of local funding for immunization initiatives.

PH - Minor portion of operating expenses for Office of Epidemiologic Services in the Director of Health's budget.

PH - Portion of operating expenses for Bureau for Health Promotion.

MCH and PH - Portion of operating expenses for Public Information Office which manages the dissemination of education and public information material relating to maternal and child health and other appropriate subjects.

MCH and PH - Portion of operating expenses for the Office of Local and Rural Health for consultation, education and support services by community nurse/public health specialists relating to maternal and child health and risk reduction/health promotion activities.

<b>P</b>				<b>ntive Health Block Grant</b>					
		<b>SFY 1999</b>	<b>SFY 2000</b>	<b>SFY 2001</b>					
		(actual)	(estimate)	(Governor's Budget Rec)					
Office of the Secretary		61,137	16,513	16,513					
Director of Health		24,947	25,629	24,458					
Office of Local & Rural Health		126,205	130,234	128,402					
Bureau of Epidemiology & Disease Prevention		50,483	112,043	77,376					
Bureau of Health Promotion		638,305	757,416	751,693					
Bureau for Children, Youth, and Families		318,556	318,556	318,556					
<b>Aid to Local Portion</b>									
(\$ included in above totals)									
Child Health Assessment		66,000	66,000	66,000					
Home Visitor/Healthy Start		200,556	200,556	200,556					
Teen Pregnancy Prevention		52,000	52,000	52,000					
Cardiovascular Risk Reduction		150,800	150,800	150,800					
Health and Prevention Projects		42,113	42,113	42,113					
<b>Transfers to Other Agencies</b>									
Transfer of Set Aside to Attorney General		396,300	544,609	531,784					

<b>M. Mental and Child Health</b>			
	<b>SFY 1999</b>	<b>SFY 2000</b>	<b>SFY 2001</b>
		(estimate)	(Governor's Budget Rec)
Office of the Secretary	69,491	0	0
Center for Health & Environmental Statistics	115,935	136,514	136,514
Director of Health	17,934	19,129	18,114
Office of Local & Rural Health	94,157	97,084	95,096
Bureau of Consumer Health (child care program)	268,346	240,822	246,570
Bureau for Children, Youth, and Families	4,114,282	4,593,307	4,593,568
<b>Aid to Local Portion</b>			
(\$ included in above totals)			
Child Health Assessment	70,578	70,578	70,578
Home Visitor/Healthy Start	245,203	245,203	245,203
Mothers and Infants	1,008,856	1,008,856	1,008,856
Adolescent Health Promotion	117,783	117,783	117,783
Child Health	711,607	711,607	711,607
Black Infant Mortality	49,115	49,115	49,115



## GOVERNMENTAL ETHICS COMMISSION

**Testimony before Senate Appropriations  
on Senate Bill 481  
by Carol Williams  
February 10, 2000**

Senate Bill 481 would amend K.S.A. 75-3717 by adding the Governmental Ethics Commission to the list of agencies that file budget estimates on a biennial basis. The Governmental Ethics Commission made this a recommendation in its 1999 Annual Report and Recommendations.

The Commission works on an election year cycle, which is a two year cycle. Budget figures in many of the object codes in "Other Operating Expenditures" do not correlate from one calendar year to the next. Therefore, it is difficult for the Commission to prepare and submit a projected budget on an annual basis. For this reason, the Commission would like to become one of the agencies that submits its budget on a biennial basis.

The Commission urges the Committee to pass this bill out favorably.



# Economic Development Initiatives Fund

Agency/Program	Governor's Recommendation FY 2000	Senate Committee Adjustments FY 2000
Department of Commerce and Housing <sup>(1)</sup>		
Agency Operations	\$ 7,006,215	
Small Business Development Centers	485,000	
Certified Development Companies	475,000	
Kansas Industrial Training/Retraining	3,600,000	
Trade Show Promotion Grants	150,000	
Community Capacity Building Grants	197,000	
Economic Opportunity Initiative Fund	5,000,000	
Existing Industry Expansion	800,000	
Tourism Promotion Grants	952,100	
Mid-America World Trade Center	41,889	
Mainstreet Grant and Development Prog.	216,800	
Agriculture Product Development	540,000	
Training Equipment Grants	300,000	
Travel Information Center Repairs	15,000	
Motion Picture and Television Rebate	75,000	
Kansas Sports Hall of Fame	0	
Eisenhower Museum Grant	300,000	
National Teachers Hall of Fame	0	
HOME Program	0	
Subtotal - KDOCH	\$ 20,154,004	
Kansas Technology Enterprise Corporation <sup>(1)</sup>		
Agency Operations	\$ 1,338,486	
Centers of Excellence	3,552,640	
Research Matching Grants	969,196	
Business Innovative Research Grants	76,000	
State Small Business Innovation Research	440,000	
Special Projects	79,303	
Commercialization Grants	1,490,000	
Mid-America Manufact. Tech. Center	1,797,338	
EPSCoR	3,200,000	
Subtotal - KTEC	\$ 12,942,963	
Kansas, Inc.	\$ 189,563	
Board of Regents		
Matching Grants - AVTS	200,000	
Post-secondary Aid - AVTS	6,707,144	
Capital Outlay Aid - AVTS	2,000,000	
Subtotal - Education	\$ 8,907,144	
Historical Society	0	
Department of Administration		
Public TV Microwave Connection	0	
State Water Plan Fund	2,000,000	
KSU -- Ag Extension		
Ogalala Aquifer Study	0	
Wildlife and Parks		
Local Government Outdoor Recreation	500,000	
State Fair	35,000	
<b>TOTAL TRANSFERS AND EXPENDITURES</b>	<b>\$ 44,728,674</b>	<b>\$ 0</b>
 <b>EDIF Resource Estimate</b>		
	<b>Gov. Rec.</b>	<b>Senate Comm. Adj.</b>
	<b>FY 2000</b>	<b>FY 2000</b>
Beginning Balance	\$ 3,672,000	-
Gaming Revenues	42,500,000	-
Other Income <sup>(2)</sup>	800,182	-
Total Available	\$ 46,972,182	\$ 46,972,182
Less: Expenditures and Transfers	44,728,674	44,728,674
<b>ENDING BALANCE</b>	<b>\$ 2,243,508</b>	<b>\$ 2,243,508</b>

1) Does not include expenditures from prior year EDIF allocations.

2) This category includes interest income as well as amounts lapsed by the 2000 Legislature.

Senate Ways and Means Committee

Date *Monday, 10/20/00*

Attachment # *4*



# Economic Development Initiatives Fund

Agency/Program	Governor's Recommendation FY 2001	Senate Committee Adjustments FY 2001
<b>Department of Commerce and Housing*</b>		
Agency Operations	\$ 8,592,909	
Small Business Development Centers	410,000	
Certified Development Companies	400,000	
Kansas Industrial Training/Retraining	3,300,000	
Trade Show Promotion Grants	150,000	
Community Capacity Building Grants	197,000	
Economic Opportunity Initiative Fund	3,500,000	
Existing Industry Expansion	500,000	
Tourism Promotion Grants	852,100	
Mid-America World Trade Center	0	
Mainstreet Grant and Development Prog.	216,800	
Agriculture Product Development	540,000	
Training Equipment Grants	277,500	
Travel Information Centers	115,000	
Motion Picture and Television Rebate	75,000	
Kansas Sports Hall of Fame	0	
Eisenhower Museum Grant	300,000	
National Teachers Hall of Fame	300,000	
HOME Program	533,022	
Challenger Learning Center	0	
Subtotal - KDCH	\$ 20,259,331	
<b>Kansas Technology Enterprise Corporation *</b>		
Agency Operations	\$ 1,305,499	
Centers of Excellence	4,325,000	
Research Matching Grants	1,246,000	
Business Innovative Research Grants	76,000	
State Small Business Innovation Research	440,000	
Special Projects	79,303	
Commercialization Grants	845,000	
Mid-America Manufact. Tech. Center	950,931	
EPSCoR	2,436,126	
Subtotal - KTEC	\$ 11,703,859	
Kansas, Inc.	\$ 336,137	
<b>Board of Regents</b>		
Matching Grants - AVTS	200,000	
Post-secondary Aid - AVTS	6,882,981	
Capital Outlay Aid - AVTS	2,200,000	
Subtotal - Education	\$ 9,282,981	
Historical Society	0	
Department of Administration		
Public TV Microwave Connection	350,000	
State Water Plan Fund	2,000,000	
Wildlife and Parks		
Local Government Outdoor Recreation	475,000	(275,000)
State Fair	100,000	25,000
<b>TOTAL TRANSFERS AND EXPENDITURES</b>	<b>\$ 44,507,308</b>	<b>\$ (250,000)</b>

## EDIF Resource Estimate

	Gov. Rec. FY 2001	Senate Comm. Adj. FY 2001
Beginning Balance	\$ 2,243,508	-
Gaming Revenues	42,500,000	-
Other Income	594,000	-
Total Available	\$ 45,337,508	\$ 45,337,508
Less: Expenditures and Transfers	44,507,308	44,257,308
<b>ENDING BALANCE</b>	<b>\$ 830,200</b>	<b>\$ 1,080,200</b>

\* - Does not include expenditures from prior year EDIF allocations.