



Department of Health **Budget Hearing**

November 24, 2014



Customer-Focused Government Goals

Key Operational Goals	Primary Prevention	Tobacco	Substance Abuse	America's Health Rankings
	Increasing the number of TDH staff and community partners participating in primary prevention initiatives.	Use Settlement Funds in 95 counties to: <ul style="list-style-type: none"> • reduce smoking during pregnancy • reduce child interaction with secondhand smoke • reduce smoking initiation by Tennessee youth 	Reduce prescription drug abuse in Tennessee by improving the ease of use and capabilities of the controlled substances database (CSMD) as a clinical tool.	Accelerate Tennessee improvements over national average for adult tobacco use (smoking), adult physical inactivity and adult obesity as identified by United Health Foundation's America's Health Rankings.

Strategic Initiatives	Electronic Public Health Information System (EPI)	America's Health Rankings
	Implement an electronic health record as the first step in the development of an electronic, interoperable public health information system that replaces existing 20+ year old legacy system.	Accelerate Tennessee's movement toward one of the nation's ten healthiest states.



Successes

- **Baldrige** framework for Performance Excellence
 - TDH awarded Level 2 recognition.
 - Blount County awarded Level 3 recognition.
 - Four other county health departments awarded Level 2 and 18 other counties and sub-units completed Level 1.
 - 18 TDH employees have served as Baldrige examiners since 2012.
- **Controlled Substance Monitoring Database**
 - 3.3% decrease MME (YTD Sept 2014 vs 2013)
 - 40% decrease doctor shoppers (YTD Sept 2014 vs 2012)
- **Infant Mortality**
 - Decreased to lowest ever of 6.8 per 1,000 births (2013)
 - Accelerating progress/closing gap
- **Primary Prevention Initiatives**
 - 442 completed projects in all 95 counties since Jan. 2013
- **Electronic Public Health Information System (EPI)**
 - Reference System developed (~80% of unique public health content created)
 - Vendor under contract
 - Pilot site and regions identified and actively engage
 - EPI Showroom operational
- **Welcome Baby**
 - 73,100 Welcome Baby Packets mailed to new parents from Oct. 2013 – Sept. 2014



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Challenges – Health Ranking



Tennessee's vision is to be a
TOP TEN state.



Challenges – “Big Three”



Tobacco Use

Ranking:

47



Obesity

Ranking:

40



Physical Inactivity

Ranking:

45

The “Big Three” directly influence at least **six of ten** leading causes of death in Tennessee.



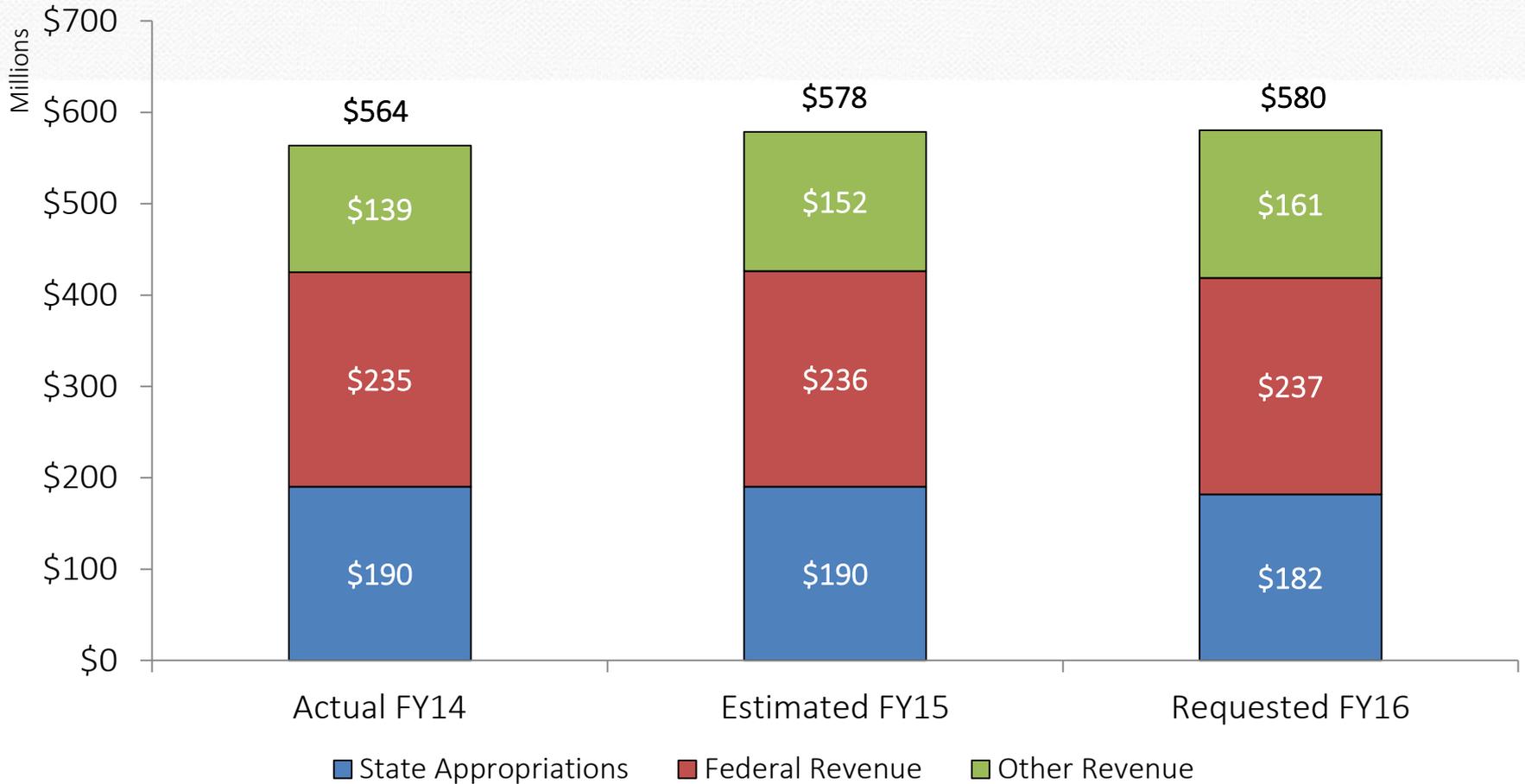
TN Rank:
42

The
Big Three
influence **44.4%**
of Tennessee's
overall rank.

Determinants	2013		NO. 1 State	Weighting
	Value	Rank		
Behaviors				25
Smoking (Percent of adult population)	24.9	47	10.6	7.5
Binge Drinking (Percent of adult population)	11.3	3	10.2	2.5
Drug Deaths (Deaths per 100,000 population)	15.7	40	5	2.5
Obesity (Percent of adult population)	31.1	40	20.5	5
Physical Inactivity (Percent of adult population)	28.6	45	16.2	2.5
High School Graduation (Percent of incoming ninth graders)	80.4	21	91.4	5
Community and Environment				22.5
Violent Crime (Offenses per 100,000 population)	644	50	123	5
Occupational Fatalities (Deaths per 100,000 workers)	5.5	36	1.9	2.5
Infectious Disease (Combined score Chlamydia, Pertussis, Salmonella*)	-0.2	21	-0.9	5
Children in Poverty (Percent younger than 18 years)	26.3	42	9.7	5
Air Pollution (Micrograms of fine particles per cubic meter)	10.1	36	5.3	5
Policy				12.5
Lack of Health Insurance (Percent without health insurance)	13.6	22	4	5
Public Health Funding (Dollars per person)	\$85	23	\$225	2.5
Immunization—Children (Percent aged 19 to 35 months)	73.1	10	80.2	2.5
Immunization—Adolescents (Percent aged 13 to 17 years)	58.5	36	82	2.5
Clinical Care				15
Low Birthweight (Percent of live births)	9	41	6	3.75
Primary Care Physicians (Number per 100,000 population)	122.4	18	196.1	3.75
Dentists (Number per 100,000 population)	50.9	36	85.6	3.75
Preventable Hospitalizations (Number per 1,000 Medicare enrollees)	80.8	46	27.4	3.75
All Determinants	-0.35	42	0.7	...
Outcomes				25
Diabetes (Percent of adult population)	11.9	46	7	3.125
Poor Mental Health Days (Days in previous 30 days)	4	30	2.8	3.125
Poor Physical Health Days (Days in previous 30 days)	4.6	45	2.9	3.125
Disparity in Health Status (By educational attainment**)	27	11	19.7	3.125
Infant Mortality (Deaths per 1,000 live births)	8	47	4.4	3.125
Cardiovascular Deaths (Deaths per 100,000 population)	309.3	44	186.9	3.125
Cancer Deaths (Deaths per 100,000 population)	214.5	45	141.3	3.125
Premature Death (Years lost per 100,000 population)	9,440	43	5,493	3.125
All Outcomes	-0.23	43	0.33	...
Overall	-0.58	42	0.92	100



Revenue Sources





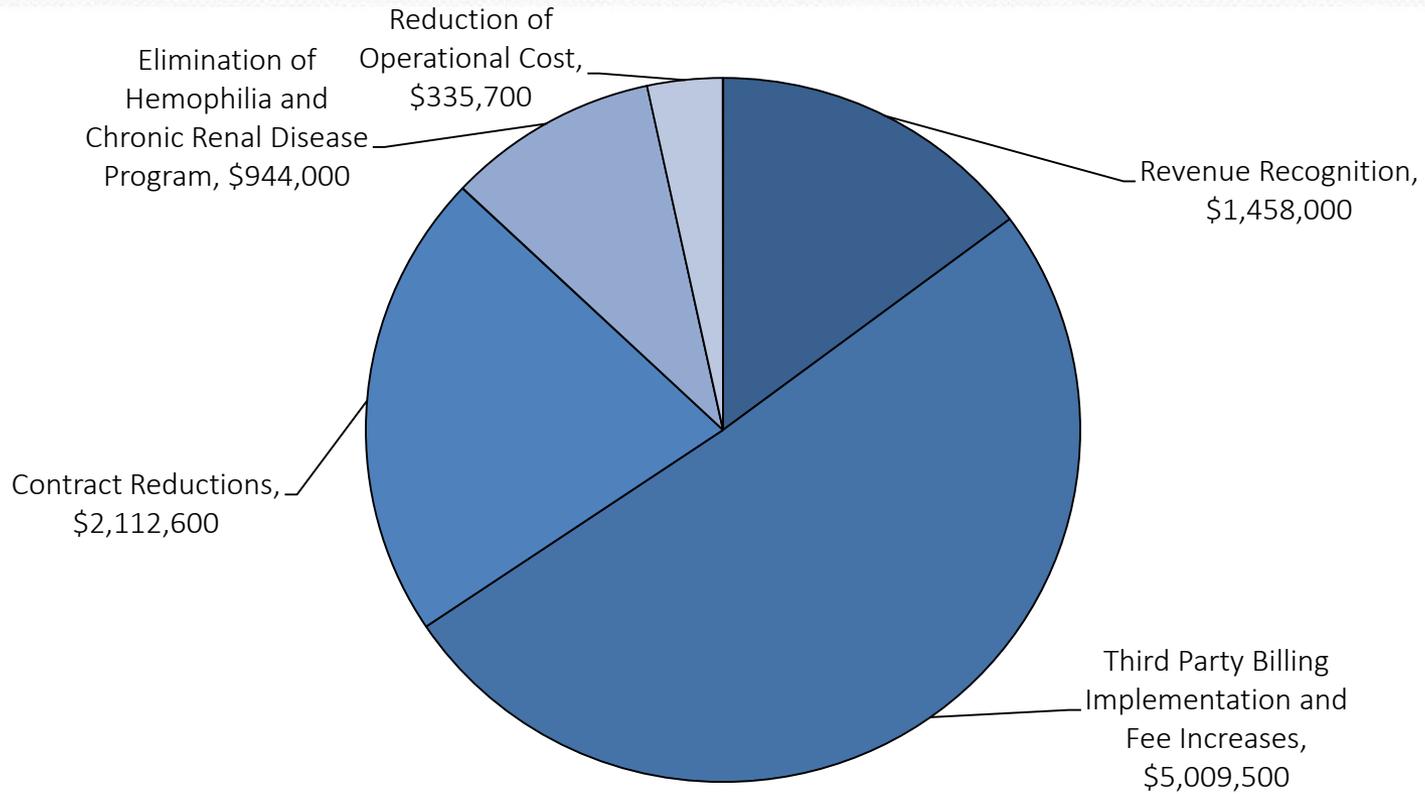
Proposed Reduction Plan

Priority	Category	Reduction Description	State Savings
1.	Program & Operations	Replace general fund state appropriations with available federal and other funds. Recognize an additional \$808,000 in dedicated appropriations.	\$1,458,000
2.	Program & Operations	Implement Third Party Billing and recognize an additional \$1.7m in dedicated appropriations from fee increases.	\$5,009,500
3.	Program & Operations	Contract Reductions	\$2,112,600
4.	Program Elimination	Elimination of the Hemophilia and Chronic Renal Disease Programs – This reduction has been submitted in prior years.	\$944,000
5.	Program & Operations	Reduction of Operational Cost	\$335,700
	Total Reductions		\$9,859,800



Proposed Reductions By Program

Total Reductions = \$9,859,800





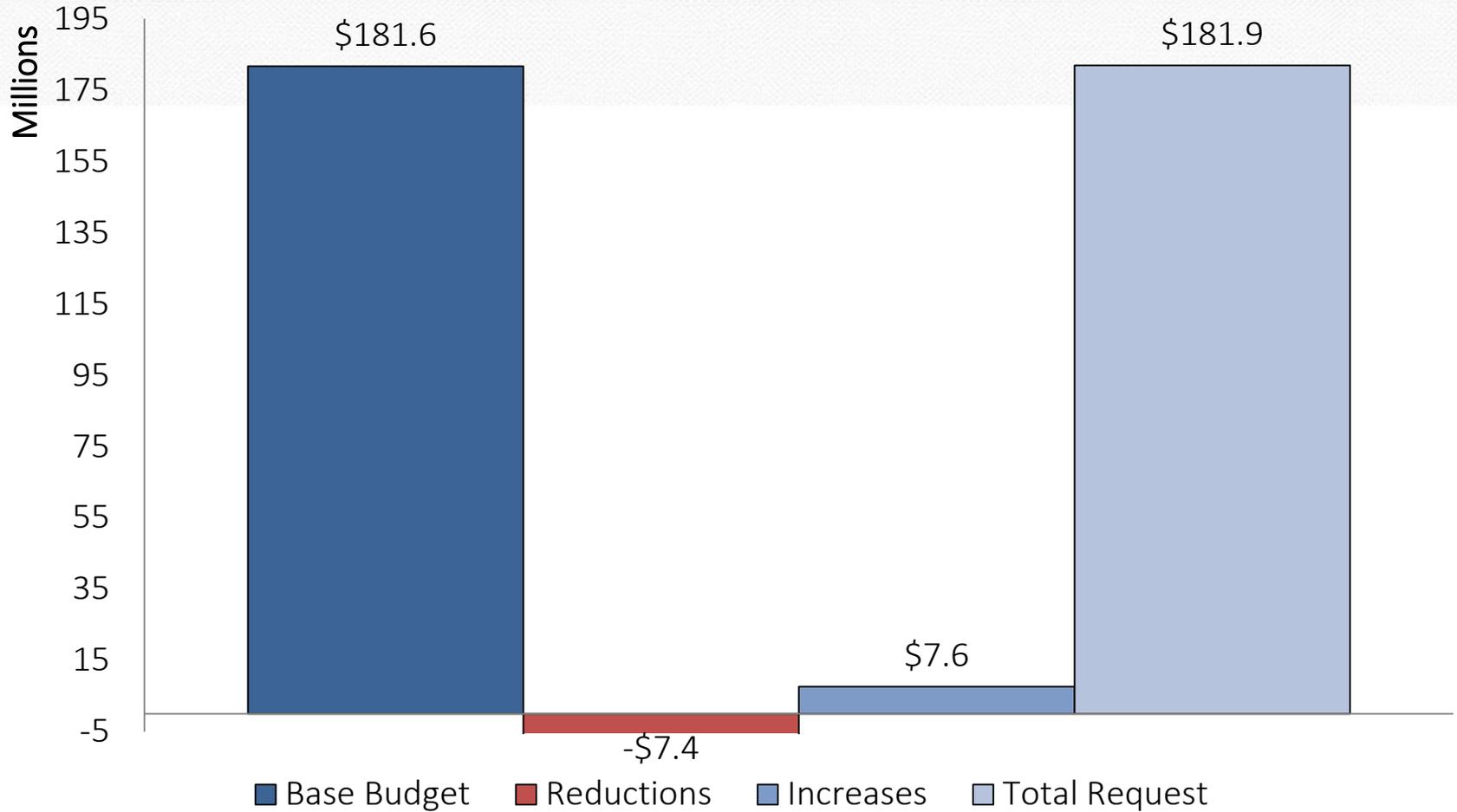
Proposed Cost Increases

	Increase	Total	State	Federal	Other	Positions
1.	Electronic Public Health Information System (EPI)	\$8,047,300	\$7,431,300	\$616,000	\$0	24
2.	Health Related Board Administration (Dedicated State)	\$171,600	\$171,600	\$0	\$0	3
3.	Two Additional Newborn Screening Tests	\$3,719,600	\$0	\$0	\$3,719,600	5
	Total Cost Increases	\$11,938,500	\$7,602,900	\$616,000	\$3,719,600	32



Request Summary

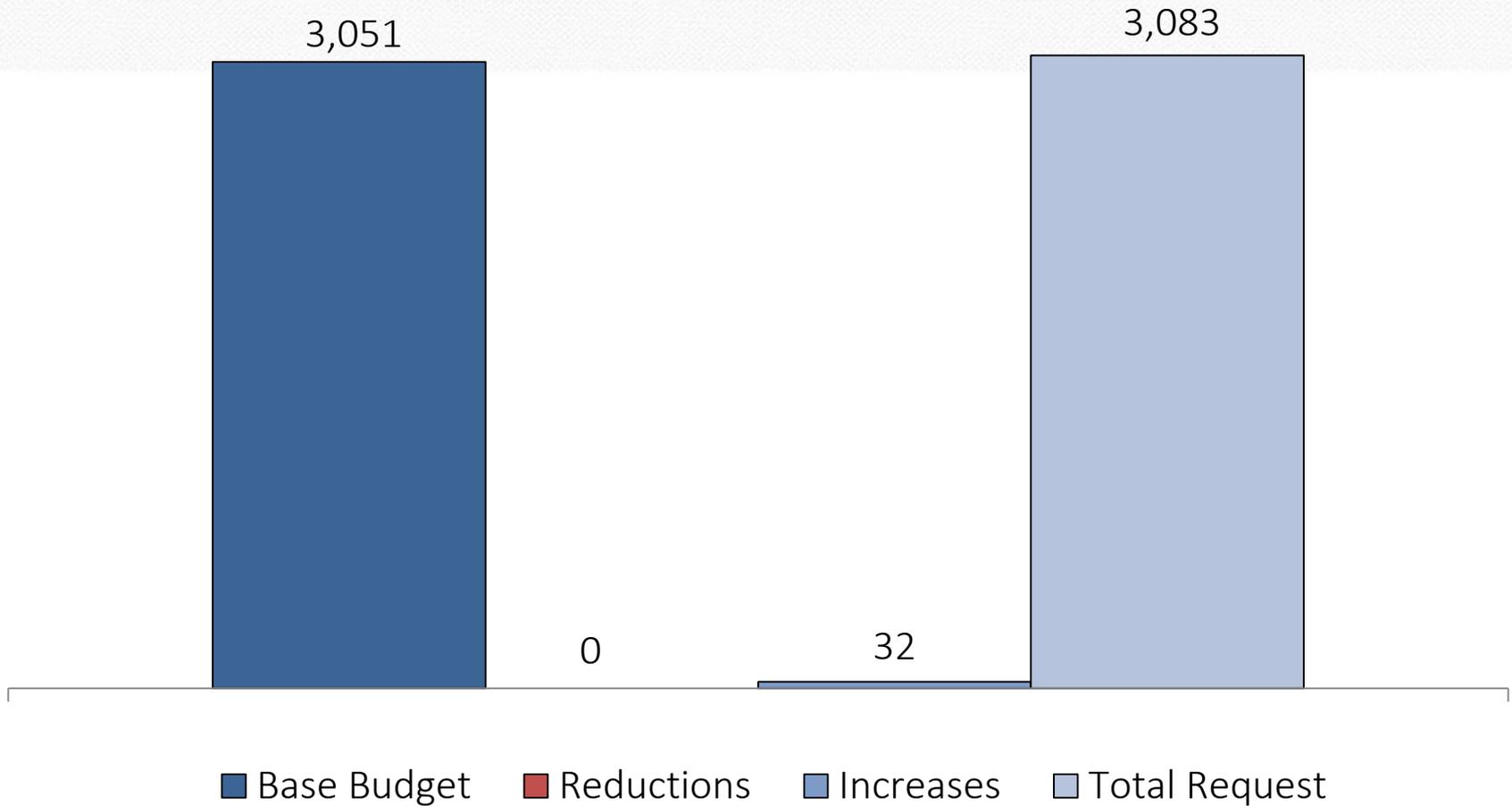
State Appropriations (in millions)





Request Summary

Authorized Positions





Authorized Positions

