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Board of Physical Therapy: mn.gov/boards/physical-therapy/
 Health Professionals Services Program (HPSP): mn.gov/boards/hpsp/

AT A GLANCE

- The Board's main function is to protect the public through the regulation of nearly 7,000 physical therapy professionals, including:
- physical therapists
- physical therapist assistants
- The Minnesota Board of Physical Therapy also has served from FY16-17 as the administering Board for the Health Professionals Services Program (HPSP), a shared service offered by the Health Regulatory Boards and the Minnesota Department of Health. HPSP provides monitoring services to ensure the Boards that licensees with possible impairments are not at risk of harming the public.

[See the budget activity narratives for more information about the Board of Physical Therapy and HPSP]

PURPOSE

BOARD OF PHYSICAL THERAPY: The Board works to ensure that **people in Minnesota are safe**. We license qualified applicants, and make sure that physical therapists (PTs) and physical therapist assistants (PTAs) maintain competence. We thoroughly investigate complaints against licensees, provide timely and impartial resolution, and when necessary, discipline licensees.

The Board's mission is to ensure that Minnesotans receive appropriate physical therapy from competent PTs and PTAs.

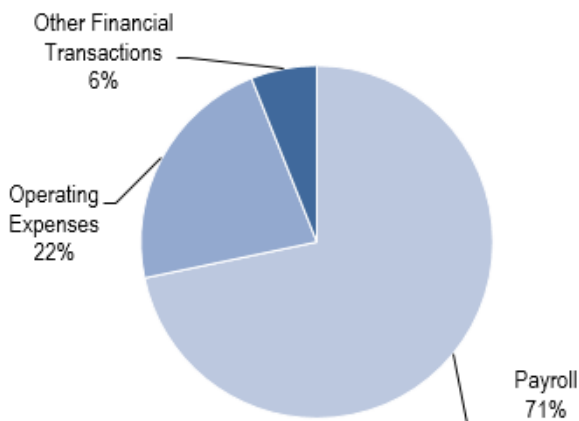
HEALTH PROFESSIONALS SERVICE PROGRAM (HPSP): This program was created in 1994 as a shared program to help protect the public by monitoring health professionals who have illnesses that might prevent them from being able to practice safely. HPSP coordinates intake, assessments, monitoring, screening, and other needed services in a confidential manner.

The Board and HPSP contribute to the statewide outcomes:

- People in Minnesota are safe
- All Minnesotans have optimal health
- Efficient and accountable government services

BUDGET

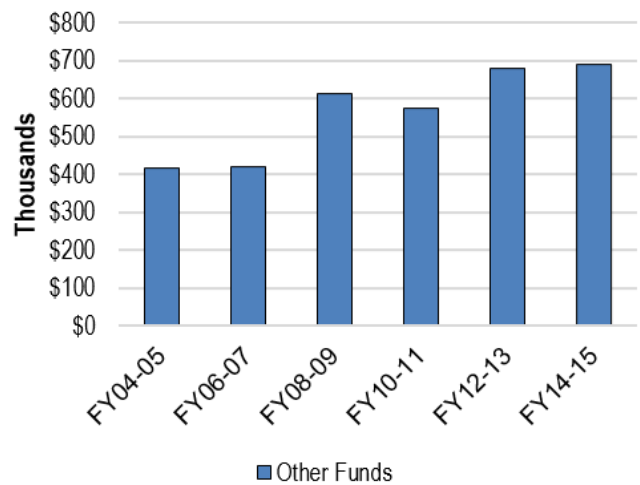
**Spending by Category
FY 15 Actual**



FY 15 includes spending for Physical Therapy. HPSP is included with Dentistry Board.

Source: BPAS

Historical Spending



FY 04-15 includes spending for Physical Therapy. HPSP is included with Dentistry Board.

Source: Consolidated Fund Statement

Physical Therapy: The Board is funded by licensure fees. Minnesota Statutes section 214.06, subdivision 1(a) compels the Board to collect fees in the amount sufficient to cover direct and indirect expenditures. Funds are deposited as non-dedicated revenue into the state government special revenue fund. From this fund, the Board receives a direct appropriation to pay for agency expenses such as salaries, rent, costs associated with disciplinary/contested cases and operating expenditures. It also pays statewide indirect costs through an open appropriation. Fees have not been raised since 1995. The Board receives no general fund dollars.

In addition to Board operations, licensure fees fund activities that support multiple boards and/or other agencies. Some of these are: the Administrative Services Unit (inter-board), Health Professionals Services Program (inter-board), Office of the Attorney General for legal services, and Criminal Background Check Program (inter-board).

HPSP: The 15 health-related licensing boards; the Emergency Medical Services Regulatory Board and the Department of Health fund the operations of the Health Professional Services Program. Fees generated by the boards are deposited in the state government special revenue fund. The Health Professional Services Program receives a direct appropriation from the state government special revenue fund. The costs to fund the operations of the program are allocated to the boards using an agreed budget formulary. HPSP services are provided at no cost to the health care professionals, although they are responsible for the costs (that are not covered by insurance) of specimen collection and analysis and for any medical or psychological care related to their [possible] impairment.

STRATEGIES

BOARD OF PHYSICAL THERAPY: The Board protects the public by licensing only qualified applicants. We also ensure that licensees meet continuing competency standards and practice with skill and safety. We investigate complaints, and enforce standards of practice and ethical conduct. Our efficient initial licensure and annual renewal processes ensure that a PT work force is available to provide care to patients. We provide comprehensive and easily available information to consumers, licensees, and applicants via website, email, in person, and telephone. Our efficiency is enhanced with an integrated regulatory database and web services. The 11-member Board (3 public members, 1 medical doctor, 2 physical therapist assistants, and 5 physical therapists) provides oversight, policy direction, and professional expertise. All physical therapy professionals in Minnesota require a license to practice, and the Board sets the standards for awarding and keeping those licenses.

HEALTH PROFESSIONALS SERVICES PROGRAM: HPSP promotes early intervention, diagnosis, and treatment for health professionals with illnesses and provides monitoring services in lieu of Board discipline, or as a part of Board discipline. Early intervention improves the likelihood of successful treatment, before clinical skills and public safety are compromised. Health practitioners self-refer or are referred to HPSP for the monitoring of their substance, psychiatric, and/or other medical disorders which may impair their ability to practice safely. HPSP protects the public by immediately intervening on health practitioners who are unsafe to practice.

M.S. 148.65-148.78 (<https://www.revisor.mn.gov/statutes/?id=148.65>) and M.R. 5601.0100-5601.3200 (<https://www.revisor.mn.gov/rules/?id=5601>) provide the legal authority for the Board of Physical Therapy

M.S. 214.31 to M.S. 214.37 (<https://www.revisor.mn.gov/statutes/?id=214.31>) provides the legal authority for HPSP.

(Dollars in Thousands)

Expenditures By Fund

	Actual	Actual	Actual	Estimate	Forecasted Base		Governor's Recommendation	
	FY14	FY15	FY16	FY17	FY18	FY19	FY18	FY19
1201 - Health Related Boards	306	384	1,109	1,441	1,303	1,303	513	514
2000 - Restrict Misc Special Revenue	0	0	21	20	20	20	20	20
Total	306	384	1,130	1,461	1,322	1,322	532	533
<i>Biennial Change</i>				1,901		54		(1,525)
<i>Biennial % Change</i>				275		2		(59)
<i>Governor's Change from Base</i>								(1,579)
<i>Governor's % Change from Base</i>								(60)

Expenditures by Program

Program: Physical Therapy Bd	306	384	1,130	1,461	1,322	1,322	532	533
Total	306	384	1,130	1,461	1,322	1,322	532	533

Expenditures by Category

Compensation	233	274	964	1,089	1,076	1,086	376	381
Operating Expenses	72	99	165	371	246	236	156	152
Other Financial Transactions	1	10	1					
Total	306	384	1,130	1,461	1,322	1,322	532	533
<u>Full-Time Equivalent</u>	3.0	2.6	8.4	11.0	11.0	11.0	4.0	4.0

1201 - Health Related Boards

	Actual	Actual	Actual	Estimate	Forecast Base		Governor's Recommendation	
	FY14	FY15	FY16	FY17	FY18	FY19	FY18	FY19
Balance Forward In	0	84	0	144	0	0	0	0
Direct Appropriation	390	350	1,258	1,297	1,283	1,283	507	508
Open Appropriation	0	0	9	14	19	19	5	5
Net Transfers	0	(4)	(14)	(14)	0	0	0	0
Cancellations	0	46	0	0	0	0	0	0
Expenditures	306	384	1,109	1,441	1,303	1,303	513	514
Balance Forward Out	83	0	144	0	0	0	0	0
<i>Biennial Change in Expenditures</i>				1,860		55		(1,524)
<i>Biennial % Change in Expenditures</i>				270		2		(60)
<i>Gov's Exp Change from Base</i>								(1,579)
<i>Gov's Exp % Change from Base</i>								(61)
Full-Time Equivalents	3.0	2.6	8.4	11.0	11.0	11.0	4.0	4.0

2000 - Restrict Misc Special Revenue

	Actual	Actual	Actual	Estimate	Forecast Base		Governor's Recommendation	
	FY14	FY15	FY16	FY17	FY18	FY19	FY18	FY19
Balance Forward In	0	0	1	0	0	0	0	0
Receipts	0	11	20	20	20	20	20	20
Expenditures	0	0	21	20	20	20	20	20
Balance Forward Out	0	11	0	0	0	0	0	0
<i>Biennial Change in Expenditures</i>				41		(1)		(1)
<i>Biennial % Change in Expenditures</i>						(2)		(2)
<i>Gov's Exp Change from Base</i>								0
<i>Gov's Exp % Change from Base</i>								0

Physical Therapy, Board of

FY18-19 Biennial Budget Change Item

Change Item Title: Information Technology and Database Maintenance

Fiscal Impact (\$000s)	FY 2018	FY 2019	FY 2020	FY 2021
General Fund				
Expenditures	0	0	0	0
Revenues	0	0	0	0
Other Funds				
Expenditures	23	23	24	25
Revenues	0	0	0	0
Net Fiscal Impact = (Expenditures – Revenues)	23	23	24	25
FTEs	0	0	0	0

Recommendation:

The Governor recommends \$46,000 in FY 2018-19 and \$49,000 in FY 2020-21 from the state government special revenue fund for increasing information technology expenses that are not currently funded with the base budget resources. Expenses in this proposal include:

- Annual Maintenance Contract of Data Base and online services (ALIMS): \$15,000
- Anticipated increase in annual Service Level Agreements expense: \$8,000

The amount recommended in FY 2018-19 represents a 5.5% increase to the board's base funding.

Rationale/Background:

- The Board of Physical Therapy has not previously funded an IT operations budget. It must identify expenses and receive additional spending authority to meet the anticipated new MNIT delivery model.
- Maintenance of current online services is critical for initial licensure and license renewal functions.
- This trend is being driven by Board reliance on and public expectation of comprehensive electronic government services.

The Board is entirely fee supported and receives no General Fund dollars to provide all services. Fees must be collected to cover direct and indirect expenditures, deposited as non-dedicated revenue into the State Government Special Revenue Fund (SGSRF). The board collects sufficient revenue to cover all expense and this change item increase.

Proposal:

- The program will buy maintenance and support of the current database and online services.
- This maintenance and support will complement and allow coordination among 13 health related agencies.
- MN.IT will direct implementation. Anticipated effective date is July 1, 2017.

MNIT Small Agency Increase:	FY2018	FY2019	FY2020	FY2021
• Annual Maintenance Contract of Data Base and online services (ALIMS)	\$15,000	\$15,000	\$16,000	\$17,000
• Service Level Agreement Annual Rates	\$8,000	\$8,000	\$8,000	\$8,000
Total	\$23,000	\$23,000	\$24,000	\$25,000

Results:

<i>Type of Measure</i>	<i>Name of Measure</i>	<i>Previous</i>	<i>Current</i>	<i>Dates</i>
Quantity	Percent of license renewals completed online	89%	94%	FY10 – FY16
Quantity	Percent of initial applications completed online	55%	92%	FY10 – FY16

Statutory Change(s):

No statutory change is required for this initiative.

Physical Therapy, Board of

FY18-19 Biennial Budget Change Item

Change Item Title: Licensure Specialist Staffing

Fiscal Impact (\$000s)	FY 2018	FY 2019	FY 2020	FY 2021
General Fund				
Expenditures	0	0	0	0
Revenues	0	0	0	0
Other Funds				
Expenditures	65	66	67	68
Revenues	0	0	0	0
Net Fiscal Impact = (Expenditures – Revenues)	65	66	67	68
FTEs	1	1	1	1

Recommendation:

The Governor recommends \$131,000 in FY 2018-19 and \$135,000 in FY 2020-21 from the state government special revenue fund to hire a licensure specialist employee. This staff person will allow the Board of Physical Therapy to better manage a growing number of applicants and licensees, thus ensuring better service levels to licensees and the public. The amount recommended in FY 2018-19 represents a 15.6% increase to the board's base funding.

Rationale/Background:

- Physical Therapists and Physical Therapist Assistants licensed and regulated by the Board increased 147% from FY 2008 (4670 licensees) to FY 2016 (6843 licensees) without a change in 3.0 FTE staff.
- Admission numbers to area PT and PTA educational programs have grown and new accredited programs have opened, resulting in 175% increase of annual application for licensure from FY 2010 (314 applicants) to FY 2016 (550 applicants).
- Over 90% of the Board's annual spending authority is required to fund salary and benefit costs, rent, required supplies and necessary IT costs, leaving little or no discretionary budget to expend.

The Board is entirely fee supported and receives no General Fund dollars to provide all services. Fees must be collected to cover direct and indirect expenditures, deposited as non-dedicated revenue into the State Government Special Revenue Fund (SGSRF). The board collects sufficient revenue to cover all expense and this change item increase.

Proposal:

- An increase in the Board's annual spending authority is recommended in the amount of \$65,000 in FY 2018 and \$66,000 in FY 2019.
- This increase will be used to fund a 1.0 FTE office and administrative specialist intermediate position to license new applicants and to process annual renewals.
- With a steadily-increasing pool of applicants and licensees, the need for additional licensure support has become critical. The Board staff must be available as a resource to licensees and the public.
- Implementation of this action item will begin when funds are allocated.

New Staff	FY2018	FY2019	FY2020	FY2021
Salary	\$65,000	\$66,000	\$67,000	\$68,000
Total	\$65,000	\$66,000	\$67,000	\$68,000

Results:

- This is an existing program. With increased spending authority, the Board will continue to provide efficient and cost-effective licensure of Physical Therapists and Physical Therapist Assistants in Minnesota, and better serve licensees and the citizens of Minnesota.

<i>Type of Measure</i>	<i>Name of Measure</i>	<i>Previous</i>	<i>Current</i>	<i>Dates</i>
Quantity	Number of Licenses renewed annually	4670	6843	FY08 – FY16
Quantity	Number of new license applications	314	550	FY10 – FY16

Statutory Change(s):

No statutory change is required for this initiative.

Physical Therapy, Board of - Health Professionals Services Program (HPSP)

FY18-19 Biennial Budget Change Item

Change Item Title: Move Program to a New Administering Board

Fiscal Impact (\$000s)	FY 2018	FY 2019	FY 2020	FY 2021
General Fund				
Expenditures	0	0	0	0
Revenues	0	0	0	0
Other Funds				
Expenditures	(878)	(878)	(878)	(878)
Revenues	(40)	(40)	(40)	(40)
Net Fiscal Impact = (Expenditures – Revenues)	(838)	(838)	(838)	(838)
FTEs	(8)	(8)	(8)	(8)

Recommendation:

The Governor recommends moving the administration of the Health Professionals Services Program's budget from the Board of Physical Therapy to the Board of Medical Practice, as allowed under M.S. 214.32. This proposal will not impact HPSP spending. This is a budget neutral proposal. All reductions in expenditures and revenues reported on this change page are accompanied by corresponding increases at the Board of Medical Practice.

The mission of the HPSP is to protect the public by providing monitoring services to regulated health professionals whose illnesses may impair their ability to practice safely.

Rationale/Background:

The HPSP is a small program of the Minnesota Health Licensing Boards. Minn. Stat. 214.32(a) states: "...If the participating boards change which board is designated to provide administrative management of the program, any appropriation remaining for the program shall transfer to the newly designated board on the effective date of the change. The participating boards must inform the appropriate legislative committees and the commissioner of management and budget of any change in the administrative management of the program, and the amount of any appropriation transferred under this provision.

The Health Professional Services Program is funded by fees collected by the Health Related Licensing Boards. The Boards are entirely fee supported and receives no General Fund dollars to provide all services. Fees must be collected to cover direct and indirect expenditures, deposited as non-dedicated revenue into the State Government Special Revenue Fund (SGSRF). Currently the boards collect sufficient revenue to cover all expense for this program and this change item increase.

Proposal:

This proposal will move the HPSP budget to the newly designated Administering Board, the Board of Medical Practice. This is an administrative change and will have no impact on program services. Included in this proposal is a shift of direct appropriations of \$864,000 annually, open appropriations of an estimated \$14,000 annually, and \$40,000 annually in revenue from the Minnesota Department of Health.

Results:

Type of Measure	Name of Measure	Previous	Current	Dates
Quantity	Number of practitioners referred	460	558	FY09 & FY15
Quality	Percent of monitoring contracts signed within 60 days	85%	93%	FY09 & FY15
Quantity	Number of practitioners discharged to their board due to non-compliance with monitoring*	283	312	FY09 & FY15
Quality	Percent of practitioners readmitted	26%	22%	FY09 & FY15

Statutory Change(s):

No statutory changes are needed.

Program: Board of Physical Therapy

Activity: Board of Physical Therapy

mn.gov/boards/physical-therapy

AT A GLANCE

BOARD OF PHYSICAL THERAPY

- 6,842 Total licensees (5,144 PTs and 1,698 PTAs)
- 489 New licenses issued
- 34 Total complaints
- 53 Resolved complaints
- 18 Discipline orders
- 30 Total open complaints on 6/30/16; 12 open longer than one year
- 1,034 Continuing Education courses reviewed

FY2015 data (transactions in one year)

PURPOSE & CONTEXT

The Board works to ensure that people in Minnesota are safe. We license qualified applicants, and make sure that physical therapists (PTs) and physical therapist assistants (PTAs) maintain competence. We thoroughly investigate complaints against licensees, provide timely and impartial resolution, and when necessary, discipline licensees.

Our mission is to ensure that Minnesotans receive appropriate physical therapy from competent PTs and PTAs.

- People in Minnesota are safe
- All Minnesotan have optimal health
- Efficient and accountable government services

SERVICES PROVIDED

Our agency is funded by fees paid for licensing and continuing education program approvals.

The three primary services that the Board engages in to regulate providers of physical therapy are:

1. **Licensure:** assurance that those approved for Minnesota licensure have met minimum standards established by the Board. These standards primarily include successful completion of education from an accredited program and passing a national examination, both of which help establish that the candidate is competent to practice. The Board also reviews the candidates' backgrounds to evaluate their fitness to practice. Beginning in May 2015, the Board has required that candidates for initial licensure complete a fingerprint background check, providing additional information for the Board to consider when making licensure decisions.
2. **Continued Competence:** the Minnesota Board of Physical Therapy uses continuing education (CE) requirements as a measure of the licensees' involvement and commitment to staying engaged in the profession. The Board has established a two-year CE cycle, during which each licensed professional must complete a minimum of 20 hours of CE activities that have significant intellectual or practical content dealing primarily with matters directly related to the practice of physical therapy or professional responsibility.
3. **Complaint Resolution:** when there is concern raised that a licensee may have violated the Practice Act, the Board initiates an investigation of the complaint and works to bring the matter to resolution. Physical therapy professionals are held to a high expectation of practice and ethical behavior as outlined in the statutes and rules governing them and enforced by the Board. Appropriate and timely resolution of complaint matters ensures that questionable behaviors are addressed and prevented from continuing.

RESULTS

<i>Type of Measure</i>	<i>Name of Measure</i>	<i>Previous</i>	<i>Current</i>	<i>Dates</i>
Quantity	Percent of licensees using the online annual license renewal system	94%	98%	2013 and 2015
Quality	Percent of licenses renewed the same day Board receives the completed renewal application	99%	99%	2013 and 2015
Quality	Percent of complaint cases resolved in less than one year	76%	78%	2013 and 2015

M.S. 148.65-148.78 and M.R. 5601.0100-5601.3200 (<https://www.revisor.mn.gov/statutes/?id=148.65>) provide the legal authority for the Board of Physical Therapy

(Dollars in Thousands)

Expenditures By Fund

	Actual	Actual	Actual	Estimate	Forecast Base		Governor's Recommendation	
	FY14	FY15	FY16	FY17	FY18	FY19	FY18	FY19
1201 - Health Related Boards	306	384	289	524	424	424	512	513
2000 - Restrict Misc Special Revenue	0	0	21	20	20	20	20	20
Total	306	384	310	544	444	444	532	533
<i>Biennial Change</i>				163		35		212
<i>Biennial % Change</i>				24		4		25
<i>Governor's Change from Base</i>								177
<i>Governor's % Change from Base</i>								20

Expenditures by Category

Compensation	233	274	239	324	311	315	376	381
Operating Expenses	72	99	71	220	133	129	156	152
Other Financial Transactions	1	10	0	0	0	0	0	0
Total	306	384	310	544	444	444	532	533
Full-Time Equivalents	3.0	2.6	2.5	3.0	3.0	3.0	4.0	4.0

1201 - Health Related Boards

	Actual	Actual	Actual	Estimate	Forecast Base		Governor's Recommendation	
	FY14	FY15	FY16	FY17	FY18	FY19	FY18	FY19
Balance Forward In	0	84	0	105	0	0	0	0
Direct Appropriation	390	350	394	419	419	419	507	508
Open Appropriation	0	0	0	0	5	5	5	5
Net Transfers		(4)						
Cancellations	0	46	0	0	0	0	0	0
Expenditures	306	384	289	524	424	424	512	513
Balance Forward Out	83	0	105	0	0	0	0	0
<i>Biennial Change in Expenditures</i>				123		36		213
<i>Biennial % Change in Expenditures</i>				18		4		26
<i>Gov's Exp Change from Base</i>								177
<i>Gov's Exp % Change from Base</i>								21
Full-Time Equivalents	3.0	2.6	2.5	3.0	3.0	3.0	4.0	4.0

2000 - Restrict Misc Special Revenue

	Actual	Actual	Actual	Estimate	Forecast Base		Governor's Recommendation	
	FY14	FY15	FY16	FY17	FY18	FY19	FY18	FY19
Balance Forward In	0	0	1	0	0	0	0	0
Receipts	0	11	20	20	20	20	20	20
Expenditures	0	0	21	20	20	20	20	20
Balance Forward Out	0	11	0	0	0	0	0	0
<i>Biennial Change in Expenditures</i>				41		(1)		(1)
<i>Biennial % Change in Expenditures</i>						(2)		(2)
<i>Gov's Exp Change from Base</i>								0
<i>Gov's Exp % Change from Base</i>								0

Program: Board of Physical Therapy
Activity: Health Professionals Services Program

mn.gov/boards/hpssp/

AT A GLANCE

- Serves the 15 health regulatory boards, the Emergency Services Regulatory Board, the Department of Health, and the practitioners they regulate
- Over 400 health practitioners referred annually
- Over 400 health practitioners discharged annually
- An average of 550 health practitioners are active in HPSP at any time
- Staffing: 8 employees consisting of Case Managers and support staff

NOTE: HPSP is a program providing services on behalf of the State agencies that regulate healthcare professionals. HPSP's structure requires that its budget and oversight be assigned to one of the Health Regulatory Boards. For 2015-2016, the Board of Physical Therapy acted as the administering board for HPSP.

PURPOSE & CONTEXT

People in Minnesota Are Safe

The Health Professionals Services Program's (HPSP) mission is to protect the public by monitoring regulated health professionals whose illnesses may impair their ability to practice safely. HPSP achieves its mission by promoting early intervention, diagnosis, and treatment as an alternative to board discipline. Early intervention improves the chances for successful treatment before clinical skills are compromised and patients may be harmed.

Efficient and Accountable Government Services

HPSP provides services to all of the health licensing boards in Minnesota. This enables all boards to access the same service. It also enables health practitioners, their employers and treatment providers easy access to program expertise.

SERVICES PROVIDED

Health practitioners self-refer or are referred to HPSP for the monitoring of their substance, psychiatric and/or other medical disorders which may impair their ability to practice safely. HPSP protects the public by immediately intervening with health practitioners who are unsafe to practice, which directly contributes to the statewide outcome that **people in Minnesota are safe**. Additionally, HPSP's enabling legislation allows some practitioners to report to HPSP without board involvement, allowing them to benefit from HPSP monitoring outside of board disciplinary processes.

To accomplish its mission, HPSP provides the following services to regulated health practitioners in Minnesota:

- Determine whether health practitioners have potentially impairing illnesses that warrant monitoring and implement immediate practice restrictions if appropriate (HPSP interventions start even before monitoring contracts are signed)
- Create and implement monitoring contracts for health practitioners with potentially impairing illnesses
- Monitor health practitioners' professional practice, continuing care, and compliance with monitoring contracts
- Report practitioners who are unsafe to practice or who violate the conditions of their monitoring contracts to their regulatory board
- Provide outreach and education to professional schools, health care employers, treatment programs and other stakeholders about HPSP services

RESULTS

HPSP protects the public by implementing monitoring contracts that require accountability and provide structure for practitioners to manage their illnesses, while also monitoring their work performance. HPSP protects the public by identifying and addressing non-compliance with treatment and monitoring or performance issues. This includes reporting or discharging practitioners to their regulatory boards where they may face disciplinary action. The measurements below do not show factors that contribute to practitioner non-compliance with monitoring (i.e. financial resources, insurance, stable support system). As HPSP reports more

practitioners to their regulatory boards for non-compliance with monitoring, the boards, in turn, refer more practitioners to HPSP for re-admittance. The following numbers reference the number of persons referred to HPSP, the number discharged from HPSP, and percent of discharged practitioners readmitted.

<i>Type of Measure</i>	<i>Name of Measure</i>	<i>Previous</i>	<i>Current</i>	<i>Dates</i>
Quantity	Number of practitioners referred	460	558	FY13 & FY15
Quality	Percent of monitoring contracts signed within 60 days	85%	93%	FY13 & FY15
Quantity	Number of practitioners discharged to their board due to non-compliance with monitoring.	283	312	FY13 & FY15
Quality	Percent of practitioners readmitted	26%	22%	FY13 & FY15

M.S. 214.31 to M.S. 214.37 (<https://www.revisor.mn.gov/statutes/?id=214.31>) provides the legal authority for HPSP.

(Dollars in Thousands)

Expenditures By Fund

	Actual	Actual	Actual	Estimate	Forecast Base		Governor's Recommendation	
	FY14	FY15	FY16	FY17	FY18	FY19	FY18	FY19
1201 - Health Related Boards	0	0	820	917	878	878	0	0
Total	#MISSING	#MISSING	820	917	878	878	0	0
<i>Biennial Change</i>				1,737		19		(1,737)
<i>Biennial % Change</i>						1		(100)
<i>Governor's Change from Base</i>								(1,756)
<i>Governor's % Change from Base</i>								(100)

Expenditures by Category

Compensation	0	0	725	766	765	771	0	0
Operating Expenses	0	0	95	151	113	107	0	0
Other Financial Transactions	0	0	1	0	0	0	0	0
Total	0	0	820	917	878	878	0	0
Total Agency Expenditures	0	0	820	917	878	878	0	0
Expenditures Less Internal Billing	0	0	820	917	878	878	0	0
<i>Full-Time Equivalents</i>	0	0	5.9	8.0	8.0	8.0	0	0

1201 - Health Related Boards

	Actual	Actual	Actual	Estimate	Forecast Base		Governor's Recommendation	
	FY14	FY15	FY16	FY17	FY18	FY19	FY18	FY19
Balance Forward In	0	0	0	39	0	0	0	0
Direct Appropriation	0	0	864	878	864	864	0	0
Open Appropriation	0	0	9	14	14	14	0	0
Net Transfers			(14)	(14)				
Expenditures	0	0	820	917	878	878	0	0
Balance Forward Out	0	0	39	0	0	0	0	0
<i>Biennial Change in Expenditures</i>				1,737		19		(1,737)
<i>Biennial % Change in Expenditures</i>						1		(100)
<i>Gov's Exp Change from Base</i>								(1,756)
<i>Gov's Exp % Change from Base</i>								(100)
Full-Time Equivalents	0.0	0.0	5.9	8.0	8.0	8.0	0	0