Department of Social and Health Services FY2002 Supplemental Budget Reduction Options ($ in thousands)

Options by Program

010 Children's Administration	2001-03 Reductions FTE	GF-S	Other	Total
Adolescent Services - Reductions in services to adolescents generally viewed as less vulnerable, including the elimination of: Family Reconciliation Services (FRS) Phase I and II; Crisis Residential Centers (CRC), and; Responsible Living Skills Program (RLSP) beds, HOPE Centers, and the Street Youth program. Caseload Impact: FRS Phase II - FY01 2,598 families; FRS Phase I - FY01 8,793 families; RLSP - FY01 76 children; HOPE - FY01 142 children; CRC - FY01 2,572 children.	(39.2)	(11,150)	(1,307)	(12,457)
Program Reductions with Least Impact on Most Vulnerable Youth - Reductions in programs serving adlolescents and special projects including: Eliminating Secure Crisis Residential Centers (Secure CRCs); CRC Assessments, and; special projects, including Americorps, Harborview Medical Training, Parent Education and Support, and Foster Parent Retention Pilot. Caseload Impact: Secure CRCs - FY01 3,400 children served in 66 beds.	0.0	(5,795)	0	(5,795)
Reduce Prevention Services - Reductions to programs that offer prevention and alternative services to children and familes in conflict including the elimination of Alternative Response System (ARS), Public Health Nurses, Continuum of Care, and Home Support Specialists. In addition, it is recommended that the remaining prevention programs--Home Based Services, Family Preservation Services (FPS), and Intensive FPS--be combined to allow for more flexibility with remaining prevention resources. Caseload Impact: ARS - FY01 234 families per month.	(33.3)	(4,889)	(1,379)	(6,268)
Other Service Reductions - Proposes the reduction of Pediatric Interim Care GF-S funding by 50%, Theraputic Child Development capacity by 35% (unused capacity), Adoption Support by $1.0 million, and Family Foster Care and Group Care by 7.5% percent. No caseload impact.	0.0	(11,385)	(3,480)	(14,865)
Systems Improvements and Efficiencies - Operational changes that focus on reduced spending, program efficiency, and resource maximization by: reducing travel, equipment and training budgets; monitor vendor transactions to eliminate overpayments; centralize CPS and FRS Intake; require financial participation of parents of developmentally disabled foster children. No caseload impact.	(10.5)	(3,408)	(1,262)	(4,670)
Total reduction options for 010	**(83.0)**	**(36,627)**	**(7,428)**	**(44,055)**

Department of Social and Health Services FY2002 Supplemental Budget Reduction Options ($ in thousands)

Options by Program

020 Juvenile Rehabilitation Administration	2001-03 Reductions FTE	GF-S	Other	Total
BECCA Funding - Assumes statuary changes to the BECCA program, which would reduce the court costs for the truancy activity. Includes PSEA funds, which could be spent elsewhere in DSHS. (Other)	0.0	(3,441)	(1,059)	(4,500)
County Program Reduction - Reduces the following county juvenile justice programs: Community Juvenile Accountability Act (CJAA) CJAA At-Risk Services; Special Sex Offender Disposition Alternative (SSODA); Chemical Dependency Disposition Alternative (CDDA); and,	0.0	(2,823)	0	(2,823)
Closure of Mission Creek Youth Camp - Close this state institution, move the residents to other state facilities, and mothball the institution for future use. This reduces 29% of the medium security beds. Impacts caseload and caseload cost.	(13.9)	(1,452)	0	(1,452)
Restructure Parole Services - Parole services are modified to introduce a case management model which includes research based interventions, transition services and consistent supervision for youth. Includes Title XIX. (Other) Impacts parole caseload.	(14.6)	(1,307)	(640)	(1,947)
Increase Community Transition Options for Lowest-Risk Youth - Revises the JRA policy allowing lower risk youth to be released on an average of 115% of their minimum sentence. Impacts caseload and Program 010.	(5.4)	(1,104)	0	(1,104)
Juvenile Violence Prevention Grant - Eliminate grant.	0.0	(900)	0	(900)
Drug/Alcohol Treatment and Employment Services Reduced - Eliminates drug/alcohol coordinators in regional offices, institutions and central office; in addition this proposal will reduce Corrections Clearinghouse employment services. Impacts Employment Security.	(5.5)	(821)	0	(821)
Alternative Community Options for Lower-Risk Offenders - Develop residential and rehabilitative service options to serve low risk youth in cost-effective alternative settings. Includes Title XIX. (Other)	(8.2)	(609)	(62)	(671)
Diagnostic Services Rate Reduction - Reduces payments to all counties to be consistent with costs incurred by the state where JRA staff already provide these service. JRA will be responsible for these services in counties unable to provide them.	8.3	(315)	0	(315)
Community Facility Conversion - Convert a 16-bed institutional cottage into a state community facility. Includes an increase to Title XIX. (Other) Impacts caseload cost.	0.8	(115)	268	153
Total Reduction Options for 020	**(38.5)**	**(12,887)**	**(1,493)**	**(14,380)**

Department of Social and Health Services FY2002 Supplemental Budget Reduction Options ($ in thousands)

Options by Program

030 Mental Health Division	FTE	GF-S	Other	Total
		2001-03 Reductions		
Eliminate service for non-Medicaid, non-acute clients - Services to persons who are not Medicaid elibible would be limited to only those services for persons in crisis. Impacts clients and cost per client.		(11,225)	(9,421)	(20,646)
Community Services Reductions - Eliminate community activities that are administed from the MHD that are not considered core functions. Impacts clients and cost per client.	0.0	(8,848)	(2,833)	(11,681)
Limit the number of prepaid health plans (PHPs) - Reserve Savings. Regional Support Networks (RSNs) and PHPs would be limited to no more than six (down from the current fourteen). Saving would be generated from the reduction in funds required to be set aside as reserve funds and allowed as other reserved or unreserved fund balances. Impacts 010, 020, 040, and 050.	0.0	(6,548)	(6,646)	(13,194)
Limit the number of prepaid health plans (PHPs) - Administrative Savings Regional Support Networks (RSNs) and PHPs would be limited to no more than six (down from the current fourteen). Savings would be generated from admininstrateve efficiencies as a result of downsizings of PHPs/RSNs. Impacts 010, 020, 040, and 050..	0.0	(3,961)	(3,975)	(7,936)
SCC - Reduce SCTF/LRA Staff and Eliminate Mitigation/Island Police - Staff reductions consistent with agency proposal and other similar facilities in the United States, starting with 1:1 and then phasing in 3:1 or 4:1 as appropriate with the additional use of electronic monitoring devices. Adjusts mitigation one-time costs (reduce the first year, eliminate the second year); department would pay for already ongoing mitigation concerns; eliminating the second year - police presence on McNeil Island, employer/education incentives, equipment replacement and residential s and miscellaneous costs. Impacts clients, cost per client, and DOC.	(14.5)	(3,816)	0	(3,816)
Change COPES/MPC Eligibility Criteria - Eligibility changes proposed by AASA and DDD creates a Medicaid Eligible reduction of 8,399 individuals.	0.0	(1,408)	(1,413)	(2,821)
Closure of PALS wards ast WSH - Close one half of the PALS unit at WSH. This will reduce PALS census to approximately 55-90 patients. Impacts 040 and 050.	(20.4)	(1,094)	(1,094)	(2,188)
Reduce research and training contracted activities with the Washington Institute for Mental Illness Research and Trainng (WIMIRT). Impacts UW and WSU.	0.0	(386)	(280)	(666)
Total reduction options for 030	**(34.9)**	**(37,286)**	**(25,662)**	**(62,948)**

Department of Social and Health Services FY2002 Supplemental Budget Reduction Options ($ in thousands)

Options by Program

040 Developmental Disabilities	2001-03 Reductions FTE	GF-S	Other	Total
Change DD (Other Conditions) Eligibility / Eliminate ICAP - RCW 71A includes eligibility for a group of persons under "Other condition...closely related to mental retardation...". This section will be stricken from the RCW and eliminated as a way for individuals to become eligible for Division programs. Division WAC will also be modified. These are individuals that have become DDD-eligible via their score on the Inventory for Client and Agency Planning (ICAP). Division funding will no longer be used for services for these individuals. 2,797 currently served individuals will lose their eligibility for DDD funding. May affect DASA, MHD, DOC, and DVR.	0.0	(12,917)	(9,071)	(21,988)
Employment and Day Program Reductions - This proposal reduces Employment and Day Programs by approximately 30% in FY03. This reduction will be realized by terminating employment/day program services for currently authorized individuals. Impacts approximately 3,000 individuals. Counties will be impacted by these reductions.	0.0	(11,000)	(5,120)	(16,120)
Change MPC Eligibility - The criteria for receiving Medicaid Personal Care (MPC) services would make the current MPC eligibility criteria more stringent, effective October 2002. An estimated 512 children with developmental disabilities and 1,100 adults with developmental disabilities will lose assistance for their basic personal care needs. In addition, an estimated 7.7 children per month and 7.8 adults per month that would have otherwise been added to the	0.0	(7,003)	(7,028)	(14,031)
Reduce Family Support - Terminate Family Support services for the last 1,800 clients added to the program. Purchase only respite care and therapies for persons remaining in the Family Support program. Eliminate access to specialized equipment, community guides, environmental modifications, transportation, and community activities used as respite such as summer camp, etc. Requires WAC changes. Impacts all 3,058 Family Support clients.	0.0	(4,100)	(900)	(5,000)
Freeze Case Manager Hiring - In the 2001-03 budget, the Division was appropriated funds to hire an additional 48 case managers (and some other support staff) during FY 2002. The Division is proposing to freeze hiring into these positions as part of the proposed 15% reductions. The purpose of the funding was to reduce the caseload ratios for case managers serving clients placed on the Home and Community Services Waiver from 1:108 to 1:75. This proposal will maintain the current ratios. Requires changes to budget proviso. This reduction may impact federal and legal issues.	(46.0)	(3,267)	(2,588)	(5,855)
Close SOLA - The State Operated Living Alternatives (SOLA) intensive tenant support program, which uses state employees to support individuals who live in their own (private) residence, will be eliminated effective July 2002. Some impact on clients (clients will have a change of providers), and it will require a reduction of state employment. Requires RCW change (contracting out).	(112.4)	(1,543)	(1,542)	(3,085)

Department of Social and Health Services FY2002 Supplemental Budget Reduction Options ($ in thousands)

Options by Program	2001-03 Reductions			
	FTE	GF-S	Other	Total
Reduce RHC Staffing - The Division is proposing to reduce staffing in the Residential Habilitation Centers during FY03 by a total of 65.4 FTEs. Client services will be impacted, as fewer RHC staff is available to provide direct care, professional services, and nursing care. Will require a reduction of state employment. May impact federal requirements and licensing certification.	(32.7)	(1,413)	(1,470)	(2,883)
Freeze High School Transition Placements - This proposal would freeze placements into the High School Transition program as of January 1, 2002. Clients scheduled to receive county services prior to that date will continue in the program, but no additional clients will be served the remainder of the fiscal year or in the subsequent fiscal year. Impacts 908 individuals. May impact DVR. Will impact Counties. Requires changes to budget proviso.	0.0	(1,250)	0	(1,250)
Reduce Case Managers - This proposal would reduce current case management staff by 37.5 FTEs beginning July 1, 2002. They were added in previous biennia to address increases in the Family Support caseload authorized by the legislature. The FTEs were made permanent in the 2001-03 budget. Client caseload ratios will be higher (1:128) with the lose of staff. This reduction may impact federal and legal issues.	(18.8)	(1,146)	(871)	(2,017)
Reduce Professional Services - Reduce professional services in medical-dental and therapies by 10%, effective July 2002. Clients will not be reduced, but the frequency of services offered will be impacted. Impacts Community Protection Program.	0.0	(357)	0	(357)
Eliminate Funding for DSB - The 2001-03 appropriations to the Division include $184,000 that is passed through to the Department of Services for the Blind (DSB) via contract. That agency then passes the funds through to the Deaf-Blind Service Center in King County, also by way of contract. No impact to DDD clients as these clients served are not eligible for services from DDD. Impacts DSB.	0.0	(184)	0	(184)
ODHH Service Center Reduction - ODHH will reduce funding for all six service community centers by 15% to 25%, effective July 2002. Approximately 3,000 clients will be impacted.	0.0	(119)	0	(119)
Total reduction options for 040	**(209.8)**	**(44,299)**	**(28,590)**	**(72,889)**

Department of Social and Health Services FY2002 Supplemental Budget Reduction Options ($ in thousands)

Options by Program

050 Aging and Adult Services Administration	2001-03 Reductions FTE	GF-S	Other	Total
Change COPES/MPC Eligibility Criteria - The threshold for eligibility would be raised, requiring that to be eligible for services, individuals would have to be more severly limited in their ability to care for themself. A caseload reduction of 6,787 clients resulting from this change would impact MAA and MHD. DDD will also be impacted by the MPC Eligibility change.	(2.0)	(31,996)	(32,285)	(64,281)
Nursing Home Rate Reductions - This proposal would reduce the land, capitalization and other non-direct care components of nursing home rates. This proposed rate reduction avoids any reductions to the direct care rate component. Total rate reduction of ($25.03) per day.	0.0	(25,000)	(25,000)	(50,000)
Eliminate Nursing Home Variable Return Rate Component - The elimination of this Nursing Facility rate component is not a component of the direct care rate. Total rate reduction of ($2.80) per day.	0.0	(6,500)	(6,500)	(13,000)
Adjust Licensing Fees in Residential Settings to Fund Licensing Costs - This proposal would increase licensing fees in Adult Family Homes, Boarding Homes and Nursing Facilities to an amount that will cover the cost of administering the licensing functions.	0.0	(5,194)	5,194	0
Establish a 90% Minimum Occupancy Level For All Nursing Home Rate Components - This rate change from 85% to 90% will only impact those nursing facilities operating under 90%. Total rate reduction of ($1.28) per day.	0.0	(3,000)	(3,000)	(6,000)
Eliminate the Private Duty Nursing Program - Current clients would continue to be financially and functionally eligible for COPES or MPC, but would not receive the skilled nursing services currently provided in their own homes. 65-70 individuals could move to nursing facilities to receive the necessary care they need.	0.0	(2,944)	(2,945)	(5,889)
Eliminate Volunteer Chore Services - This volunteer program provides over 240,000 volunteer services hours to eligible elderly and disabled individuals who cannot be served by other state programs.	0.0	(1,800)	0	(1,800)

Department of Social and Health Services FY2002 Supplemental Budget Reduction Options ($ in thousands)

Options by Program	2001-03 Reductions			
	FTE	GF-S	Other	Total
Assisted Living Rate Reduction - This proposal would eliminate the add-on to the capital portion of the assisted living rate. This rate reduction may impact as many as 1,618 residents in 130 facilities.	0.0	(1,279)	(1,279)	(2,558)
Reduce Senior Citizens Service Act (SCSA) Services - This proposal would cut funding for SCSA by 10% in FY 2003. SCSA is administered by Area Agencies on Aging (AAA's). AAA's combine SCSA funding with Federal Older American's Act monies to support locally identified and prioritized services that benefit older individuals.	0.0	(930)	0	(930)
Eliminate Foster Grandparent Program (Effective 1/1/03) - This program does not serve AASA clients directly, but allows 270 older volunteers to provide services to approximately 1,667 children with special or exceptional needs.	(2.1)	(155)	(454)	(609)
Eliminate the Senior Companion Program (Effective 1/1/03) - This program allows 111 older volunteers to provide services to approximately 719 disabled, at risk seniors.	(0.7)	(45)	(196)	(241)
Total reduction options for 050	**(4.8)**	**(78,843)**	**(66,465)**	**(145,308)**

Department of Social and Health Services FY2002 Supplemental Budget Reduction Options ($ in thousands)

Options by Program

060 Economic Services Administration (ESA)	2001-03 Reductions FTE	GF-S	Other	Total
Eliminate GAU Program - This reduction would take place July 1, 2002 and effect approximately 20,000 adults. Total grants and medical evidence expenses savings equals $51,192,439. There will be 88.4 in FTE savings totalling $4,328,000.	(44.2)	(54,971)	(549)	(55,520)
Reduce Child Care State Match - This reduction would be effective July 1 2002. 1) Decrease eligibility for Working Connections Child Care from 225% for FPL to 200%. 2) Change co-pay structure to reflect an increase from 44% to 53% of each additional income dollar above 137.5% FPL and up to 200%. 3) Reduce existing contract expenditures. Seven different contracts with providers would be eliminated and there will be a 45% reduction of eight other contracted providers.	0.0	(8,844)	(5,657)	(14,501)
Eliminate DASA Treatment Funding - This reduction would be effective July 1, 2002 and will eliminate funding currently contracted to the Division of Alcohol and Substance Abuse (DASA) for assessment and treatment of TANF clients. 6,513 TANF clients received the assessment and 5,340 TANF clients received treatment in FY 01. DASA will be directly effected by this reduction. Possible impacts on Children's and other DSHS Administrations (foster care, MAA).	0.0	(3,076)	0	(3,076)
Eliminate State funding for Refugee Assistance Program - This reduction would be effective July 1, 2002 and will eliminate employment and social services to low-income refugees. This cut will effect around 700 adult clients per year.	0.0	(980)	0	(980)
Guardian ad Litem - This reduction would occur July 1, 2002 and transfer the administration of the Guardian ad Litem contracts to the Counties.	0.0	(200)	0	(200)
Total reduction options for 060	**(44.2)**	**(68,071)**	**(6,206)**	**(74,277)**

Department of Social and Health Services FY2002 Supplemental Budget Reduction Options ($ in thousands)

Options by Program

070 Alcohol & Substance Abuse Services	2001-03 Reductions FTE	GF-S	Other	Total
Eliminate TASC Program - This proposal would eliminate Treatment Accountability for Safe Communities (TASC) programs effective July 1, 2002. TASC does not provide treatment services and thus is not a core DASA service. Approximately 2,640 persons will not be served. Exchange PSEA funds for GF-S in FY03.	(0.3)	(3,454)	(6)	(3,460)
Eliminate Expansion for Gravely Disabled - This proposal would eliminate the budget proviso for expanding capacity for substance abuse treatment for persons gravely disabled from drug and alcohol addictions. Although treatment services are a core DASA service, this proviso has not been implemented by contract yet. Eliminate proviso, but retain PSEA funding. Exchange PSEA funds for GF-S in both years.	0.0	(2,800)	0	(2,800)
Reduce Recovery House Beds - This proposal would eliminate 71 of the 293 beds currently contracted for Recovery House, or 24 percent of available capacity, effective July 1, 2002. Recovery House, a residential treatment service, is a core service but this reduction eliminates some under-utilization. Approximately 730 clients will lose services. Exchange federal SAPT block grant funds for GF-S in FY03.	(0.3)	(1,021)	(6)	(1,027)
Total reduction options for 070	**(0.5)**	**(7,275)**	**(12)**	**(7,287)**

Department of Social and Health Services FY2002 Supplemental Budget Reduction Options ($ in thousands)

Options by Program

080 Medical Assistance Administration	2001-03 Reductions FTE	GF-S	Other	Total
Eliminate MI, GAU and ADATSA - effective July 1, 2002, MI: would eliminate the MI program of medical services - affects approximately 1,900 clients annually, all of whom access these services. Programs affected: 060, 080; GAU: eliminate GAU program of medical care services - approximately 10,240 clients (avg monthly caseload) - costs per eligible client per year of $309, Programs Affected: 030, 060, 070, 080; ADATSA: eliminate ADATSA program of medical care services - approximately 6,200 clients per month - Programs Affected: 060, 070, 080.	0.0	(74,690)	13,046	(61,644)
Increase Discount on AWP - for Drugs - effective July 1, 2002, MAA would implement greater AWP discounts for ingredient costs for pharmaceuticals when determining reimbursement to pharmacies, effectively reducing the amount paid for these services. Affects all pharmacy providers.	0.0	(32,389)	(35,088)	(67,477)
Adult Dental Reduction - effective July 1, 2002, would eliminate all but emergent dental care services for adult clients. This will affect approximately 406,000 adult MAA clients, 99,900 of whom utilize dental services. Programs affected: 030, 040, 050, 060, 070, 080	(0.5)	(17,790)	(15,370)	(33,160)
Change COPES and MPC Eligibility - effects on MAA program from AASA/DDD proposal to increase the level of acuity for clients who apply for waivered services effective October 1, 2002. Caseload Impact: see AASA calculations. Other programs affected: 040, 050	0.0	(13,415)	(13,416)	(26,831)
Eliminate Medical Coverage for Legal Immigrant Families - Federal law precludes some legal immigrants receiving TANF cash and Medicaid for 5-years period after entry into US. The State Family Assistance (SFA) program provides these families with cash assistance and/or medical coverage. This proposal eliminates full scope medical for these families. Effective July 1, 2003. Coverage of affected children will continue. Caseload Impact of 2,561 adults (annual number). Programs affected: 060, 080	0.0	(10,513)	0	(10,513)
Eliminate Maternity Support Services - for pregnant/post-pregnant women. Services are essentially preventive aimed at increasing positive birth outcomes for these client. Clients affected include approximately 23,300 women over age 21 and 15,200 under age 21 (annual numbers). Programs affected: 080, DOH	0.0	(8,602)	(8,674)	(17,276)

Department of Social and Health Services FY2002 Supplemental Budget Reduction Options ($ in thousands)

Options by Program	2001-03 Reductions			
	FTE	GF-S	Other	Total
Eliminate Interpreter Services - all interpreter services would no longer be paid for by MAA effective July 1, 2002. Physicians and other providers are required by law to provide such services so costs would shift to these providers. No caseload impacts.	0.0	(6,578)	(6,578)	(13,156)
Reduce Healthy Option (HO) Rate Increase by 2.3 Points. Would result in a net increase to HO plans for the 2001-03 Biennium of 5.7% as opposed to the budgeted increase of 8%. Places plans on level playing field with fee-for-services providers who will likely face the same reduction if the VRI is taken by OFM. No caseload impacts.	0.0	(2,534)	(2,543)	(5,077)
Eliminate COBRA Insurance Coverage - effective July 1, 2002 this proposal would eliminated state funds provided for health insurance coverage for eligible individuals with HIV/AIDS. No caseload estimates available from MAA.	0.0	(2,347)	0	(2,347)
Eliminate Medicaid Buy-In - this will curtail implementation of the Medicaid Buy-In program for Working Disabled persons approved by the Legislature this last session. Caseload projections assumed 1,125 clients would become Medicaid eligible due to this new program in SFY 03.	0.0	(1,380)	(1,380)	(2,760)
Freeze SCHIP Enrollment 7/1/02 - this proposal would result in curtailment of any new SCHIP enrollments effective July 1, 2002, This would have the effect of reducing the SCHIP caseload by 200 for each month of SFY 03.	(0.5)	(1,184)	(2,270)	(3,454)
Outpatient Prospective Payment System Rate Reduction - Reduces OPPS rates by 2% - The OPPS implementation was scheduled for April 1, 2002 but hospitals have delayed adoption of elements of the system. MAA proposes a total 6% reduction to OPPS rates to approximate impact to outpatient hospital rates if the OPPS were implemented on time. 4% in reduced rates have already been implemented. The added 2% is proposed to be effective July 1, 2002. No Caseload Impacts.	0.0	(739)	(739)	(1,478)
Total reduction options for 080	**(1.0)**	**(172,161)**	**(73,012)**	**(245,173)**

Department of Social and Health Services FY2002 Supplemental Budget Reduction Options ($ in thousands)

Options by Program

	2001-03 Reductions			
100 Vocational Rehabilitation	**FTE**	**GF-S**	**Other**	**Total**
Reduce State Match for the VR Basic Support Grant - A $1,2 million reduction in state funds results in loss of $4.5 million federal funds, based on the 78.7 percent federal share of the grant, and also will incure a maintenance of effort penalty for this loss of federal funds. Total reduction for DVR is $5.7 million. This proposal reduces 3 admin FTEs and administration costs of $275,000. This reduction would take effect July 1, 2002 and result in approximately 2500 fewer individuals with the most significant disabilities receiving VR plan services. Potential programs affected: TANF, SSI, DDD, and MAA	(3.0)	(1,231)	(4,547)	(5,778)
Eliminate Extended Support Services Program - The reduction will take effect July 1, 2002 and affect 92 clients. The unit cost of service delivery is an average of $284/month/person). Programs affected: 040	0.0	(313)	0	(313)
Total reduction options for 100	**(3.0)**	**(1,544)**	**(4,547)**	**(6,091)**
110 Administrative Services				
Administrative reductions to a maximum of 15% will result when program reductions are known. Administrative reductions will be based on cuts taken by the Governor. Administrative reductions require organizational and fiscal flexibility.		(4,567)	(3,728)	(8,295)
Total reduction options for 110	**0.0**	**(4,567)**	**(3,728)**	**(8,295)**
145 Payments to Other Agencies				
Lower Billings from Other Agencies - This assumes DSHS will make reductions to lines of business that preclude the need for services from other agencies, and that other agencies will make programmatic reductions resulting in lower billings to DSHS for those services.	0.0	(4,305)	(1,333)	(5,638)
Total reduction options for 145	**0.0**	**(4,305)**	**(1,333)**	**(5,638)**

Department of Social and Health Services FY2002 Supplemental Budget Reduction Options ($ in thousands)

Options by Program	2001-03 Reductions			
150 ISSD	**FTE**	**GF-S**	**Other**	**Total**
Cost Avoidance and Streamlining: ISSD will minimize TZ costs through reduced spending in salaries, benefits, training, equipment, and other miscellaneous operating expenses. Because they did not have a target, the program used 10% for the first year and 15% for the second but are not sure if they can reach these savings.	0.0	(2,009)	0	(2,009)
Eliminate Telephone System Upgrades: ISSD will eliminate or reduce the cross-agency purchases of new or upgraded telephone systems.	0.0	(668)	0	(668)
Operations Staff Reduction: ISSD will reduce staff through delayed hiring, not filling positions, and eliminating graveyard shifts.	(10.3)	(650)	0	(650)
PC-IT IS Replacement: ISSD will move the Record of Assistance Paid System (RAPS) from the mainframe to the server and will save $21,000 per month. This will have no negative impact on clients or programs.	0.0	(378)	0	(378)
Delay Exchange Disaster Recovery Equipment: ISSD had $295,000 budgeted to purchase recovery equipment for the Exchange e-mail system. If this reduction takes place and there is a disaster that affects OB2, staff would be without email for 3-4 months.	0.0	(295)	0	(295)
Total reduction options for 150	**(10.3)**	**(4,000)**	**0**	**(4,000)**

Total Reduction Options for DSHS	**(430.0)**	**(471,865)**	**(218,476)**	**(690,341)**