



**Gina M. Raimondo,
Governor**

**State of Rhode Island and
Providence Plantations
Fiscal Year 2018
Budget**

**Volume II – Health and Human
Services**

Agency

Executive Office Of Health And Human Services

Agency Mission

Assure access to high quality and cost effective services that foster the health, safety, and independence of all Rhode Islanders.

Agency Description

The Executive Office of Health and Human Services (EOHHS) serves as “the principal agency of the executive branch of state government” (R.I.G.L. §42-7.2-2) responsible for overseeing the organization, finance and delivery of publicly funded health and human services. In this capacity, the EOHHS administers the state’s Medicaid program and provides strategic direction to Rhode Island’s four health and human services agencies: Department of Health (DOH); Human Services (DHS); Children, Youth, and Families (DCYF); and Behavioral Healthcare, Developmental Disabilities, and Hospitals (BHDDH). The EOHHS and the agencies under its umbrella provide direct services to over 300,000 Rhode Islanders. Additionally, the agencies deliver an array of regulatory, protective and health promotion services to our communities.

EOHHS’ objectives are to manage the organization, design and delivery of health and human services and to develop and implement an efficient and accountable system of high quality, integrated health and human services.

To achieve this end, EOHHS seeks to:

- Improve the economy, efficiency, coordination, and quality of health and human services policy and planning and budgeting and financing.
- Design strategies and implement best practices that foster service access, consumer safety and positive outcomes.
- Maximize and leverage funds from all available public and private sources, including federal financial participation, grants and awards.
- Increase public confidence by conducting independent reviews of health and human services issues in order to promote accountability and coordination across departments.
- Ensure that state health and human services policies and programs are responsive to changing consumer needs and to the network of community providers that deliver services and supports.

Statutory History

Title 42 Chapter 7.2 of the Rhode Island General Laws, as amended, established the Executive Office of Health and Human Services within the Executive Branch of state government. Title 40 Chapter 8 of the Rhode Island General Laws provides the state with the statutory foundation for the Medical Assistance Program. Title 42, Chapter 12.4 entitled “Medicaid Reform Act of 2008” is the statutory authority for the adoption of rules and regulations to implement the provisions of the state’s Section 1115 demonstration waiver.

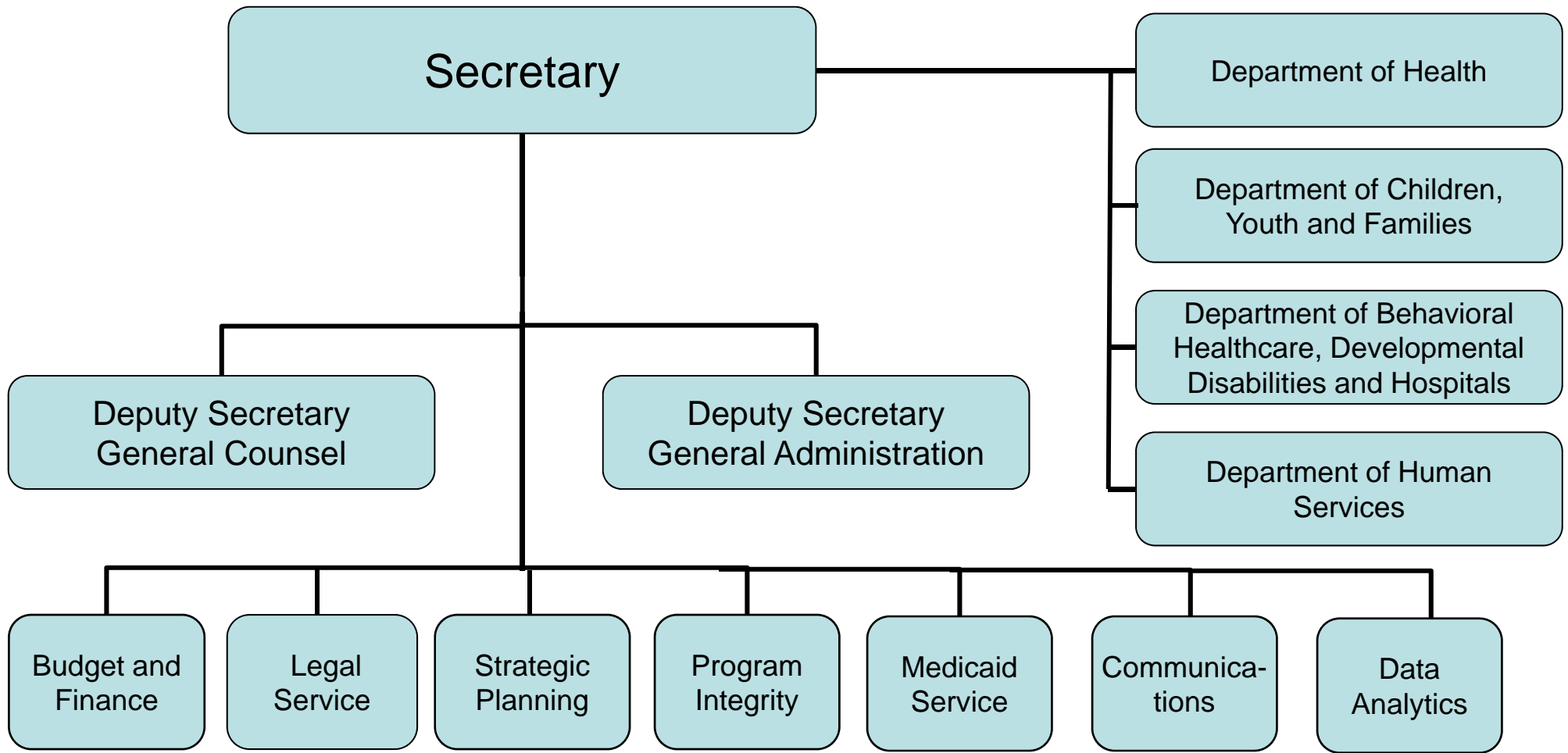
Budget

Executive Office Of Health And Human Services

	FY 2015 Audited	FY 2016 Audited	FY 2017 Enacted	FY 2017 Revised	FY 2018 Recommend
Expenditures By Program					
Central Management	127,894,331	175,148,947	146,441,762	170,756,679	111,560,795
Medical Assistance (Including Medicaid)	2,206,756,129	2,185,152,190	2,251,750,823	2,318,276,974	2,354,484,953
Total Expenditures	\$2,334,650,460	\$2,360,301,137	\$2,398,192,585	\$2,489,033,653	\$2,466,045,748
Expenditures By Object					
Personnel	101,585,555	151,174,006	115,813,865	140,678,393	81,991,693
Operating Supplies and Expenses	6,987,032	5,084,584	6,074,864	7,252,294	7,976,205
Assistance and Grants	2,225,133,066	2,203,891,007	2,275,900,315	2,340,116,880	2,375,150,892
Subtotal: Operating Expenditures	2,333,705,653	2,360,149,597	2,397,789,044	2,488,047,567	2,465,118,790
Capital Purchases and Equipment	944,807	151,540	403,541	986,086	926,958
Total Expenditures	\$2,334,650,460	\$2,360,301,137	\$2,398,192,585	\$2,489,033,653	\$2,466,045,748
Expenditures By Funds					
General Revenue	915,652,909	911,535,815	936,987,012	945,360,040	938,634,987
Federal Funds	1,402,816,157	1,433,337,164	1,447,676,171	1,527,858,521	1,506,283,492
Restricted Receipts	16,181,394	15,428,158	13,529,402	15,815,092	21,127,269
Total Expenditures	\$2,334,650,460	\$2,360,301,137	\$2,398,192,585	\$2,489,033,653	\$2,466,045,748
FTE Authorization	184.0	187.0	179.0	178.0	269.0

The Agency

Executive Office of Health and Human Services



Personnel

Executive Office Of Health And Human Services Agency Summary

	Grade	FY 2017		FY 2018	
		FTE	Cost	FTE	Cost
Classified		176.0	15,544,244	176.0	15,668,583
Unclassified		2.0	318,190	2.0	318,190
Subtotal		178.0	\$15,862,434	178.0	\$15,986,773
Consolidation of OHHS Finance Staff		-	-	91.0	-
Interdepartmental Transfer		-	727,137	-	583,669
Temporary and Seasonal		-	22,032	-	22,032
Turnover		-	(\$1,407,493)	-	(\$1,464,723)
Subtotal		-	(\$658,324)	91.0	(\$859,022)
Total Salaries		178.0	\$15,204,110	269.0	\$15,127,751
Benefits					
Payroll Accrual			87,749		87,202
Retiree Health			906,835		904,322
Health Benefits			2,217,572		2,409,805
FICA			1,141,998		1,139,939
Retirement			3,980,760		3,917,140
Subtotal			\$8,334,914		\$8,458,408
Total Salaries and Benefits		178.0	\$23,539,024	269.0	\$23,586,159
Cost Per FTE Position (Excluding Temporary and Seasonal)			\$132,118		\$87,599
Statewide Benefit Assessment			\$702,536		\$676,389
Payroll Costs		178.0	\$24,241,560	269.0	\$24,262,548
Purchased Services					
Buildings and Ground Maintenance			400		400
Training and Educational Services			88,500		88,500
Legal Services			51,000		51,000
Other Contracts			86,700		86,700
Information Technology			58,962,887		5,603,144
Clerical and Temporary Services			91,900		191,900
Management & Consultant Services			57,135,820		51,687,875
Medical Services			19,626		19,626
Subtotal			\$116,436,833		\$57,729,145
Total Personnel		178.0	\$140,678,393	269.0	\$81,991,693
Distribution By Source Of Funds					
General Revenue		91.4	\$31,830,355	182.4	\$25,972,713
Federal Funds		81.6	\$107,889,712	81.6	\$54,818,477
Restricted Receipts		5.0	\$958,326	5.0	\$1,200,503
Total All Funds		178.0	\$140,678,393	269.0	\$81,991,693

Performance Measures

Executive Office Of Health And Human Services

Medicaid Payments Tied to an Alternative Payment Methodology

Value-based payments reward providers for the quality of their care, as opposed to just the amount of care, which leads to better patient experience, improved outcomes and lower costs and use of health care services. The figures below represent the percentage of Medicaid payments with some aspect tied to value-based payments such as shared savings arrangements, bundled payments, or capitation. [Note: Calendar Year 2016 data is not yet finalized.]

	2014	2015	2016	2017	2018
Target	--	--	30%	40%	50%
Actual	--	1%	--	--	--

Performance for this measure is reported by calendar year.

Severe and Persistent Mental Illness (SPMI) Per-Member Costs

Patients with SPMI represent some of the most high needs and most expensive patients in our health care delivery system who benefit most from coordinated, integrated, individually-managed care. The figures below represent the per member, per month cost of adults with SPMI. [Notes: Fiscal Years 2014-2016 data are under quality review. 2014 Actual and targets have changed.]

	2014	2015	2016	2017	2018
Target	--	--	--	\$1,835	\$1,790
Actual	\$1,822	\$1,930	\$1,882	--	--

Performance for this measure is reported by state fiscal year.

Emergency Department Usage - All Medicaid Members

Care delivered in an emergency room is often more expensive, less coordinated, and higher intensity than patients need. While some visits are truly emergent for unpreventable reasons, recent national studies estimate that up to 71 percent of emergency room visits are potentially avoidable, either because they are primary-care treatable or could have been prevented with better management of chronic illness or a more coordinated care experience. (Source: Truven Analytics. "Avoidable Emergency Department Usage Analysis." April, 2013.) The figures below represent the number of emergency department visits per 1,000 full-time equivalent (FTE) members. [Notes: Fiscal Years 2014-2016 data are under quality review. 2014 Actual and targets have changed.]

	2014	2015	2016	2017	2018
Target	--	--	--	645	604
Actual	736	700	689	--	--

Performance for this measure is reported by state fiscal year.

Performance Measures

Executive Office Of Health And Human Services

Emergency Department Usage - Medicaid SPMI Subpopulation

Patients with SPMI are more likely to use the Emergency Room, which often delivers less coordinated, integrated, and cost-efficient services than these high-needs patients require. The figures below represent the number of emergency department visits per 1,000 Medicaid FTE members with SPMI. [Notes: Fiscal Years 2014-2016 data are under quality review. 2014 Actual and targets have changed.]

	2014	2015	2016	2017	2018
Target	--	--	--	2,130	1,995
Actual	2,194	2,101	2,276	--	--

Performance for this measure is reported by state fiscal year.

Medicaid Members with a Primary Care Provider (PCP) Visit in the Past Year

When patients regularly visit their primary care provider, "[they] have better management of chronic diseases, lower overall health care costs, and a higher level of satisfaction with their care." (Friedberg, Mark W. "Primary Care: A Critical Review Of The Evidence On Quality And Costs Of Health Care." Health Affairs Volume 29.Issue 5 (May 2010);pp 766-772.) The figures below represent the percentage of Medicaid - combined Rite Care and Fee-For-Service - FTE members who have seen a PCP in the last 12 months. [Note: Fiscal Years 2014-2016 data are under quality review.]

	2014	2015	2016	2017	2018
Target	--	68.6%	74.9%	81.2%	85.4%
Actual	62.3%	68.5%	69.2%	--	--

Performance for this measure is reported by state fiscal year.

Long Term Support Services Spending on Institutional Care

A preferred alternative to institutional long-term care, in terms of matching care intensity to the patient's need, improved cost savings and better patient experience, are "home and community based services". EOHHS aims to increase our use of home and community based services, when appropriate, for members in need of long term care. The figures below represent the percentage of long-term care spending on institutional nursing homes or hospice care. [Note: 2014 and 2015 actuals have been updated to reflect more accurate data.]

	2014	2015	2016	2017	2018
Target	--	--	75%	70%	75%
Actual	87.6%	86.92%	86.01%	--	--

Performance for this measure is reported by state fiscal year.

The Program

Executive Office Of Health And Human Services Central Management

Program Mission

To efficiently and effectively manage the major programmatic and administrative operations of the Executive Office.

Program Description

The Central Management program is comprised of several distinct units that were formed through the restructuring of functional responsibilities across the health and human services subsidiary departments and include: Office of the Secretary, Budget and Finance, Innovation and Policy, Partner Engagement, Legal Services, Medical Assistance (Medicaid) Administration, and the Office of Program Integrity. The structure of EOHHS is designed to achieve greater efficiency in the organization, finance, design, and delivery of services. The centralization of certain functions modernizes existing systems, leverages available resources, and streamlines service delivery and payment systems.

The transfer of the Medicaid Administration function from the Department of Human Services established EOHHS as the “Single State Agency” for Medicaid Administration in Rhode Island. Medical Assistance Administration strives to ensure access to high quality health care services, to assure the efficiency and economy of those services, to coordinate service-delivery efforts with other state departments and agencies, and to administer programs in a manner consistent with federal and state laws and regulations.

Statutory History

Title 42 Chapter 7.2 of the Rhode Island General Laws established the Executive Office of Health and Human Services within the Executive Branch of state government.

The Budget

Executive Office Of Health And Human Services Central Management

	2015 Audited	2016 Audited	2017 Enacted	2017 Revised	2018 Recommend
Expenditures By Subprogram					
Operations	127,894,331	175,148,947	146,441,762	170,756,679	111,560,795
Total Expenditures	\$127,894,331	\$175,148,947	\$146,441,762	\$170,756,679	\$111,560,795
Expenditures By Object					
Personnel	101,585,555	151,174,006	115,813,865	140,678,393	81,991,693
Operating Supplies and Expenses	6,984,816	5,082,801	6,074,864	7,252,294	7,976,205
Assistance and Grants	18,379,153	18,740,600	24,149,492	21,839,906	20,665,939
Subtotal: Operating Expenditures	126,949,524	174,997,407	146,038,221	169,770,593	110,633,837
Capital Purchases and Equipment	944,807	151,540	403,541	986,086	926,958
Total Expenditures	\$127,894,331	\$175,148,947	\$146,441,762	\$170,756,679	\$111,560,795
Expenditures By Funds					
General Revenue	28,046,360	34,276,826	32,544,387	32,882,050	26,936,377
Federal Funds	95,096,346	134,719,716	109,982,973	131,674,537	76,682,149
Restricted Receipts	4,751,625	6,152,405	3,914,402	6,200,092	7,942,269
Total Expenditures	\$127,894,331	\$175,148,947	\$146,441,762	\$170,756,679	\$111,560,795

Personnel

Executive Office Of Health And Human Services Central Management

	Grade	FY 2017		FY 2018	
		FTE	Cost	FTE	Cost
Classified					
DEPUTY DIRECTOR DEPARTMENT OF HUMAN	00148A	1.0	156,361	1.0	162,073
MEDICAID PROGRAM DIRECTOR	00152A	1.0	155,192	1.0	155,192
DEPUTY DIRECTOR OF HEALTH	00145A	1.0	134,078	1.0	134,078
ADMINISTRATIVE AND LEGAL SUPPORT SERVICES	00145A	4.0	530,160	4.0	535,630
ASSOCIATE DIRECTOR II (MHRH)	00144A	2.0	263,539	2.0	263,539
ASSOCIATE DIRECTOR (DHS) DIV OF	00146A	4.0	510,351	4.0	525,141
ASSOCIATE DIRECTOR (DHS) DIV OF COMMUNITY	00143A	1.0	127,248	1.0	127,248
ASSOCIATE DIRECTOR (FINANCIAL MANAGEMENT)	00144A	6.0	755,595	6.0	765,108
ASSOCIATE DIRECTOR DEPARTMENT OF ELDERLY	00141A	1.0	118,288	1.0	118,288
CONSULTANT PUBLIC HEALTH NURSE	00926A	10.0	1,174,350	10.0	1,174,350
IMPLEMENTATION DIRECTOR POLICY AND	00140A	1.0	115,274	1.0	115,274
ASSISTANT DIRECTOR FINANCIAL AND CONTRACT	00141A	4.0	454,538	4.0	459,166
CHIEF OF STRATEGIC PLANNING, MONITORING	00143A	4.0	445,167	4.0	459,432
CHIEF ECONOMIC AND POLICY ANALYST	00142A	1.0	107,616	1.0	107,616
CHIEF OF LEGAL SERVICES	00139A	3.0	315,047	3.0	315,047
ADMINISTRATOR FOR MEDICAL SERVICES	00141A	4.0	419,072	4.0	429,634
CHIEF MEDICAL CARE SPECIALIST	00A34A	2.0	204,854	2.0	204,854
COMMUNITY HEALTH NURSE COORDINATOR	00923A	5.0	511,899	5.0	511,899
ASSISTANT ADMINISTRATOR (ASSISTANCE	00A35A	1.0	101,968	1.0	101,968
DEPUTY CHIEF OF LEGAL SERVICES	00137A	4.0	407,362	4.0	407,362
ADMINISTRATOR, FAMILY AND ADULT SERVICES	00141A	1.0	100,486	1.0	102,860
ASSISTANT ADMINISTRATOR FAMILY AND	00A35A	2.0	200,218	2.0	200,218
CHIEF RATE SETTING ANALYST	00A35A	1.0	98,722	1.0	98,722
CHIEF HUMAN SERVICES BUSINESS OFFICER	00A33A	1.0	98,712	1.0	98,712
CHIEF FAMILY HEALTH SYSTEMS	00137A	6.0	592,106	6.0	587,536
INTERDEPARTMENTAL PROJECT MANAGER	00139A	6.0	573,814	6.0	591,760
ADMINISTRATOR I (MHRH)	00136A	1.0	92,652	1.0	92,652
PUBLIC ASSISTANCE BUSINESS MANAGER	00A33A	1.0	89,543	1.0	89,543
CHIEF HEALTH SYSTEMS DEVELOPMENT	00137A	1.0	87,240	1.0	87,240
SENIOR LEGAL COUNSEL	00134A	19.0	1,642,687	19.0	1,647,895
PRINCIPAL HUMAN SERVICES POLICY AND	00A30A	2.0	172,438	2.0	172,438
SENIOR MEDICAL CARE SPECIALIST	00A30A	4.0	343,332	4.0	343,646
LEGAL COUNSEL (MHRH)	00136A	3.0	252,686	3.0	252,686
CHIEF HEALTH PROGRAM EVALUATOR	00137A	2.0	166,992	2.0	169,908
SUPERVISOR FINANCIAL MANAGEMENT AND	00135A	2.0	162,413	2.0	162,413
APPEALS OFFICER	00A30A	6.0	484,951	6.0	487,624
SENIOR HUMAN SERVICES POLICY AND SYSTEMS	00A28A	1.0	79,776	1.0	79,776
LEGAL COUNSEL	00132A	1.0	79,720	1.0	79,720
HEALTH PROGRAM ADMINISTRATOR	00135A	2.0	159,248	2.0	162,096
CHIEF OF STAFF DEVELOPMENT, TRAINING &	00135A	1.0	78,042	1.0	80,890
CHIEF PROGRAM DEVELOPMENT	00134A	1.0	75,951	1.0	78,305
SENIOR SYSTEMS ANALYST	00A26A	1.0	75,933	1.0	75,933
PRINCIPAL HUMAN SERVICES BUSINESS OFFICER	00A28A	3.0	226,007	3.0	226,007
PROGRAMMING SERVICES OFFICER	00131A	4.0	299,390	4.0	301,799
PRINCIPAL RATE ANALYST (COMMUNITY BASED	00A28A	1.0	70,559	1.0	70,559

Personnel

Executive Office Of Health And Human Services Central Management

	Grade	FY 2017		FY 2018	
		FTE	Cost	FTE	Cost
MEDICAL CARE SPECIALIST	00A25A	4.0	275,948	4.0	279,714
SENIOR RATE ANALYST (COMMUNITY BASED	00A25A	2.0	131,934	2.0	132,822
CHIEF IMPLEMENTATION AIDE	00128A	3.0	189,360	3.0	193,513
SENIOR HUMAN SERVICES POLICY AND SYSTEMS	00328A	2.0	122,946	2.0	122,946
SOCIAL CASE WORKER II	00A24A	3.0	178,956	3.0	183,510
SOCIAL CASE WORKER	00A22A	2.0	119,256	2.0	119,256
ASSISTANT ADMINISTRATIVE OFFICER	0AB21A	1.0	58,457	1.0	58,457
PRINCIPAL MANAGEMENT AND METHODS	00128A	1.0	56,849	1.0	58,892
OFFICE MANAGER	00123A	2.0	111,500	2.0	111,500
ELIGIBILITY TECHNICIAN	00321A	1.0	51,950	1.0	51,950
SENIOR COMMUNITY PROGRAM LIAISON WORKER	00122A	1.0	48,943	1.0	48,943
RATE ANALYST (COMMUNITY BASED SERVICES)	00A22A	1.0	47,486	1.0	48,973
LEGAL ASSISTANT	00119A	4.0	180,163	4.0	181,359
DATA CONTROL CLERK	00315A	13.0	546,218	13.0	548,985
PARALEGAL AIDE	00314A	2.0	77,153	2.0	77,765
SENIOR WORD PROCESSING TYPIST	00312A	1.0	35,548	1.0	36,161
Subtotal		176.0	\$15,544,244	176.0	\$15,668,583
Unclassified					
DEPUTY SECRETARY - GENERAL COUNSEL	00851A	1.0	176,362	1.0	176,362
SECRETARY OF HEALTH AND HUMAN SERVICES	00954KF	1.0	141,828	1.0	141,828
Subtotal		2.0	\$318,190	2.0	\$318,190
Consolidation of OHHS Finance Staff		-	-	91.0	-
Interdepartmental Transfer		-	727,137	-	583,669
Temporary and Seasonal		-	22,032	-	22,032
Turnover		-	(1,407,493)	-	(1,464,723)
Subtotal		-	(\$658,324)	91.0	(\$859,022)
Total Salaries		178.0	\$15,204,110	269.0	\$15,127,751
Benefits					
Payroll Accrual			87,749		87,202
FICA			1,141,998		1,139,939
Retiree Health			906,835		904,322
Health Benefits			2,217,572		2,409,805
Retirement			3,980,760		3,917,140
Subtotal			\$8,334,914		\$8,458,408
Total Salaries and Benefits		178.0	\$23,539,024	269.0	\$23,586,159
Cost Per FTE Position (Excluding Temporary and Seasonal)			\$132,118		\$87,599
Statewide Benefit Assessment			\$702,536		\$676,389
Payroll Costs		178.0	\$24,241,560	269.0	\$24,262,548

Personnel

Executive Office Of Health And Human Services Central Management

	Grade	FY 2017		FY 2018	
		FTE	Cost	FTE	Cost
Purchased Services					
Information Technology			58,962,887		5,603,144
Clerical and Temporary Services			91,900		191,900
Management & Consultant Services			57,135,820		51,687,875
Legal Services			51,000		51,000
Other Contracts			86,700		86,700
Buildings and Ground Maintenance			400		400
Training and Educational Services			88,500		88,500
Medical Services			19,626		19,626
Subtotal			\$116,436,833		\$57,729,145
Total Personnel		178.0	\$140,678,393	269.0	\$81,991,693
Distribution By Source Of Funds					
General Revenue		91.4	\$31,830,355	182.4	\$25,972,713
Federal Funds		81.6	\$107,889,712	81.6	\$54,818,477
Restricted Receipts		5.0	\$958,326	5.0	\$1,200,503
Total All Funds		178.0	\$140,678,393	269.0	\$81,991,693

The Program

Executive Office Of Health And Human Services Medical Assistance (Including Medicaid)

Program Mission

To assure the availability of high quality health care services to program recipients.

Program Description

The Medical Assistance Program assures quality and access to necessary medical services for eligible recipients, primarily financed through Medicaid. Authorized under Title XIX of the Social Security Act, Medicaid is an entitlement program administered by states to provide medical benefits to low income persons who are aged, blind, or disabled, to low income children and families, and to qualifying low income persons without dependent children. Medicaid is jointly financed by states and the federal government according to the prevailing Federal Medical Assistance Percentage (FMAP). Rhode Island's FMAP, which is based on a measure of relative per capita personal income, is 51.02 percent for federal fiscal year 2017 and 51.45 percent for federal fiscal year 2018.

EOHHS, in accordance with the Global Consumer Choice Compact Waiver and a multitude of state and federal laws, specifies the scope of covered services, establishes fees for services and reimbursement rates for hospital and nursing facility services, and adjudicates and pays claims for medical services submitted by providers. The Medical Assistance Program covers a broad scope of medical services provided to eligible individuals by service providers licensed by the Department of Health or other appropriate state or federal accrediting authorities, and enrolled as service providers by the Medical Assistance Program.

Statutory History

Title XIX of the Social Security Act was enacted by Congress under the provision of Public Law 89-97 on July 30, 1965. The Rhode Island Medical Assistance Program was implemented under Title 40, Chapter 8 of the Rhode Island General Laws. Title 42 Chapter 12.3 and Title 40-6.2 of the Rhode Island General Laws authorized the Department of Human Services to establish and administer the RIte Care Program. EOHHS has since become the administering agency for Medical Assistance.

The Budget

Executive Office Of Health And Human Services Medical Assistance (Including Medicaid)

	2015 Audited	2016 Audited	2017 Enacted	2017 Revised	2018 Recommend
Expenditures By Subprogram					
Managed Care	636,066,655	638,130,693	648,008,656	657,100,001	655,887,362
Hospitals	205,173,596	196,137,342	201,285,963	199,648,916	186,957,573
Long-Term Care	250,235,567	238,825,063	252,601,809	233,400,002	240,851,925
Other Services	521,724,025	482,768,991	484,970,661	562,472,000	613,205,716
Pharmacy	48,626,335	52,144,168	56,267,225	58,356,055	63,880,762
Rhody Health Partners	526,144,448	557,651,347	589,616,509	588,300,000	574,701,615
Special Education	18,785,503	19,494,586	19,000,000	19,000,000	19,000,000
Total Expenditures	\$2,206,756,129	\$2,185,152,190	\$2,251,750,823	\$2,318,276,974	\$2,354,484,953
Expenditures By Object					
Operating Supplies and Expenses	2,216	1,783	-	-	-
Assistance and Grants	2,206,753,913	2,185,150,407	2,251,750,823	2,318,276,974	2,354,484,953
Subtotal: Operating Expenditures	2,206,756,129	2,185,152,190	2,251,750,823	2,318,276,974	2,354,484,953
Total Expenditures	\$2,206,756,129	\$2,185,152,190	\$2,251,750,823	\$2,318,276,974	\$2,354,484,953
Expenditures By Funds					
General Revenue	887,606,549	877,258,989	904,442,625	912,477,990	911,698,610
Federal Funds	1,307,719,811	1,298,617,448	1,337,693,198	1,396,183,984	1,429,601,343
Restricted Receipts	11,429,769	9,275,753	9,615,000	9,615,000	13,185,000
Total Expenditures	\$2,206,756,129	\$2,185,152,190	\$2,251,750,823	\$2,318,276,974	\$2,354,484,953