

# (HT0) DEPARTMENT OF HEALTH CARE FINANCE

## **MISSION**

The mission of the Department of Health Care Finance (DHCF) is to improve health outcomes by providing access to comprehensive, cost-effective, and quality health care services for residents of the District of Columbia.

## **CAPITAL PROGRAM OBJECTIVES**

### **DC Access System (DCAS)**

As an umbrella eligibility and enrollment system for Health and Human Services, DCAS provides access to cross agency automated databases for case data, such as demographics, beneficiary data, and benefit issuance; which will allow new case information data to be added. The system will also determine Medicaid eligibility.

### **Medicaid Management Information System (MMIS)**

The Centers for Medicare and Medicaid Services (CMS) requires each Medicaid state and the District to maintain and operate a Medicaid Management Information System (MMIS). The MMIS serves as the District's Medicaid claims processing engine and supports DHCF staff in their day-to-day duties. CMS requires that the system technology be refreshed every five years to ensure it is up to date and contracts are completed openly. To remain compliant with CMS, the District must begin procuring a new MMIS.

### **United Medical Center**

Assist the Mayor, Council, and consultant team in evaluation of the operational and facility needs of United Medical Center.

**Elements on this page of the Agency Summary include:**

- **Funding Tables:** Past budget allotments show the allotment balance, calculated as allotments received to date less all obligations (the sum of expenditures, encumbrances, intra-District advances and pre-encumbrances). Agencies are allowed to encumber and pre-encumber funds up to the limit of a capital project’s budget authority, which might be higher than allotments received to date. For this reason, a negative balance on a project sheet does not necessarily indicate overspending or an anti-deficiency violation. A negative balance is permitted in this calculation of remaining allotment authority.
- **Additional Appropriations Data (\$000):** Provides a summary of the budget authority over the life of the project. The table can be read as follows:
  - › **Original 6-Year Budget Authority:** Represents the authority from the fiscal year in which budget was first appropriated through the next 5 years.
  - › **Budget Authority Through FY 2024 :** Represents the lifetime budget authority, including the 6-year budget authority for FY 2019 through FY 2024.
  - › **FY 2019 Budget Authority Revisions:** Represents the changes to the budget authority as a result of reprogramming, redirections and rescissions (also reflected in Appendix F) for the current fiscal year.
  - › **6-Year Budget Authority Through FY 2024 :** This is the total 6-year authority for FY 2019 through FY 2024 including changes from the current fiscal year.
  - › **Budget Authority Request Through FY 2025 :** Represents the 6-year budget authority for FY 2020 through FY 2025.
  - › **Increase (Decrease) :** This is the change in 6-year budget requested for FY 2020 - FY 2025 (change in budget authority is shown in Appendix A).
- **Estimated Operating Impact:** If a project has operating impacts that the agency has quantified, the effects are summarized in the respective year of impact.
- **FTE Data (Total budget in FTE Table might differ from actual budget due to rounding):** Provides the number for Full-Time Equivalent (FTE) employees approved as eligible to be charged to capital projects by, or on behalf of, the agency. Additionally, it provides the total budget for these employees (Personal Services), the non personnel portion of the budget in the agency’s capital plan, and the percentage of the agency CIP budget from either expense category.
- **Facility Location Map:** For those agencies with facilities projects, a map reflecting projects and their geographic location within the District of Columbia.

(Dollars in Thousands)

Phase	Funding By Phase - Prior Funding					Approved Funding						
	Allotments	Spent	Enc/ID-Adv	Pre-Enc	Balance	FY 2020	FY 2021	FY 2022	FY 2023	FY 2024	FY 2025	6 Yr Total
(00) Feasibility Studies	41,501	40,720	780	0	0	0	0	0	0	0	0	0
(01) Design	7,778	5,750	15	0	2,013	0	0	0	0	0	0	0
(04) Construction	39,142	16,237	19,007	0	3,898	39,575	86,000	198,800	0	0	0	324,375
(06) IT Requirements Development/Systems Design	292,674	107,015	45,856	4,709	135,094	13,562	11,164	10,995	8,831	7,612	0	52,164
<b>TOTALS</b>	<b>381,094</b>	<b>169,723</b>	<b>65,658</b>	<b>4,709</b>	<b>141,005</b>	<b>53,137</b>	<b>97,164</b>	<b>209,795</b>	<b>8,831</b>	<b>7,612</b>	<b>0</b>	<b>376,539</b>

Source	Funding By Source - Prior Funding					Approved Funding						
	Allotments	Spent	Enc/ID-Adv	Pre-Enc	Balance	FY 2020	FY 2021	FY 2022	FY 2023	FY 2024	FY 2025	6 Yr Total
GO Bonds - New (0300)	60,882	45,257	10,146	0	5,479	37,500	28,000	0	0	0	0	65,500
Pay Go (0301)	24,571	18,883	5,318	277	93	2,000	0	0	0	7,612	0	9,612
Short-Term Bonds – (0304)	37,086	16,929	8,564	447	11,145	13,637	11,164	10,995	8,831	0	0	44,627
Taxable Bonds – (0309)	8,700	0	5,000	0	3,700	0	58,000	198,800	0	0	0	256,800
LRMF - Bus Shelter Ad Revenue (0333)	810	810	0	0	0	0	0	0	0	0	0	0
Federal (0350)	249,045	87,843	36,630	3,984	120,588	0	0	0	0	0	0	0
<b>TOTALS</b>	<b>381,094</b>	<b>169,723</b>	<b>65,658</b>	<b>4,709</b>	<b>141,005</b>	<b>53,137</b>	<b>97,164</b>	<b>209,795</b>	<b>8,831</b>	<b>7,612</b>	<b>0</b>	<b>376,539</b>

Additional Appropriation Data		Estimated Operating Impact Summary						
		Expenditure (+) or Cost Reduction (-)						
		FY 2020	FY 2021	FY 2022	FY 2023	FY 2024	FY 2025	6 Yr Total
First Appropriation FY	2010	No estimated operating impact						
Original 6-Year Budget Authority	606,231							
Budget Authority Through FY 2024	784,067							
FY 2019 Budget Authority Changes								
Capital Reprogrammings FY 2019 YTD	-300							
6-Year Budget Authority Through FY 2024	783,767							
Budget Authority Request Through FY 2025	757,634							
Increase (Decrease)	-26,133							

  

Full Time Equivalent Data			
Object	FTE	FY 2020 Budget	% of Project
Personal Services	0.0	0	0.0
Non Personal Services	0.0	53,137	100.0

### HT0-MES23-DCAS RELEASE 3

**Agency:** DEPARTMENT OF HEALTH CARE FINANCE (HT0)  
**Implementing Agency:** DEPARTMENT OF HEALTH CARE FINANCE (HT0)  
**Project No:** MES23  
**Ward:**  
**Location:** DISTRICT-WIDE  
**Facility Name or Identifier:** INFORMATION TECHNOLOGY  
**Status:** Ongoing Subprojects  
**Useful Life of the Project:**  
**Estimated Full Funding Cost:** \$195,786,000

**Description:**  
 District of Columbia Access System release 3.

**Justification:**  
 Release 3 of joint project between DHCF, DHS, and HBX for a District-wide eligibility determination system (DCAS).

**Progress Assessment:**  
 On-going project

**Related Projects:**  
 MES12C-Medicaid Eligibility System, DCASCA - DCAS Capital Intra-District, MES22C

(Dollars in Thousands)

Funding By Phase - Prior Funding						Approved Funding						
Phase	Allotments	Spent	Enc/ID-Adv	Pre-Enc	Balance	FY 2020	FY 2021	FY 2022	FY 2023	FY 2024	FY 2025	6 Yr Total
(06) IT Requirements Development/Systems Design	140,241	40,695	40,521	1,940	57,085	13,162	11,164	10,995	8,831	7,612	0	51,764
<b>TOTALS</b>	<b>140,241</b>	<b>40,695</b>	<b>40,521</b>	<b>1,940</b>	<b>57,085</b>	<b>13,162</b>	<b>11,164</b>	<b>10,995</b>	<b>8,831</b>	<b>7,612</b>	<b>0</b>	<b>51,764</b>

Funding By Source - Prior Funding						Approved Funding						
Source	Allotments	Spent	Enc/ID-Adv	Pre-Enc	Balance	FY 2020	FY 2021	FY 2022	FY 2023	FY 2024	FY 2025	6 Yr Total
Pay Go (0301)	0	0	0	0	0	0	0	0	0	7,612	0	7,612
Short-Term Bonds - (0304)	35,184	16,929	8,564	447	9,244	13,162	11,164	10,995	8,831	0	0	44,152
Federal (0350)	105,056	23,766	31,957	1,492	47,841	0	0	0	0	0	0	0
<b>TOTALS</b>	<b>140,241</b>	<b>40,695</b>	<b>40,521</b>	<b>1,940</b>	<b>57,085</b>	<b>13,162</b>	<b>11,164</b>	<b>10,995</b>	<b>8,831</b>	<b>7,612</b>	<b>0</b>	<b>51,764</b>

Additional Appropriation Data	
First Appropriation FY	2017
Original 6-Year Budget Authority	54,563
Budget Authority Through FY 2024	216,314
FY 2019 Budget Authority Changes	0
6-Year Budget Authority Through FY 2024	216,314
Budget Authority Request Through FY 2025	192,005
Increase (Decrease)	-24,308

Estimated Operating Impact Summary							
Expenditure (+) or Cost Reduction (-)	FY 2020	FY 2021	FY 2022	FY 2023	FY 2024	FY 2025	6 Yr Total
No estimated operating impact							

Milestone Data	Projected	Actual
Environmental Approvals		
Design Start (FY)	01/1/2017	
Design Complete (FY)	09/1/2017	
Construction Start (FY)	10/1/2017	
Construction Complete (FY)	09/30/2024	
Closeout (FY)	12/31/2024	

Full Time Equivalent Data			
Object	FTE	FY 2020 Budget	% of Project
Personal Services	0.0	0	0.0
Non Personal Services	0.0	13,162	100.0

# HT0-MPM05-MEDICAID DATA WAREHOUSE- GO BOND

**Agency:** DEPARTMENT OF HEALTH CARE FINANCE (HT0)  
**Implementing Agency:** DEPARTMENT OF HEALTH CARE FINANCE (HT0)  
**Project No:** MPM05  
**Ward:**  
**Location:** DISTRICT-WIDE  
**Facility Name or Identifier:** INFORMATION TECHNOLOGY  
**Status:** Ongoing Subprojects  
**Useful Life of the Project:** 10  
**Estimated Full Funding Cost:** \$12,143,000

**Description:**

One of the comments made by the Centers for Medicare and Medicaid Services (CMS) during the MMIS certification exit conference was that the District was one of the few states that lacked a Medicaid data warehouse. Utilizing a data warehouse for data analysis and trending would greatly improve the District’s ability to manage the Medicaid program. In order to facilitate more efficient Medicaid program administration and support intelligent decision-making, DHCF needs a Medicaid Data Warehouse (MDW) to provide easy access to Medicaid program data from the Medicaid Management Information System (MMIS) through the use of analytical reporting tools.

This project will provide the agency the ability to quickly access over 10 years of Medicaid claims data to do data and trend analysis to better identify past and future areas of fraud. Additionally, the DW will get continuous claims data feeds from the MMIS. The DW appliance is set to be delivered to OCTO for hosting within the month, which will allow DHCF to begin testing the applications in house.

Phase 1 of this project has been completed, but there is a 2nd phase of development that will support a number of new Public Health Challenges facing DC Residents as well as inter-operability with the new Hospital systems in DC to allow faster and more reliable data for better machine learning. MDW 2.0 will have an standard technology infrastructure using .NET and take advantage of the Restful API on DHCF business use cases. The key benefits in the new MDW 2.0 will support Medication Therapy Management for our DHCF Pharmacist plus being able to meet all CMS Home Health measures, Artificial Intelligence and other interfaces that is needed to support stakeholders outside DHCF like HIE/CRISP plus the new DC Hospital PH systems.

**Justification:**

The key benefits in the new MDW 2.0 will support Medication Therapy Management for our DHCF Pharmacists while also being able to meet all CMS Home Health measures, Artificial Intelligence and other interfaces that are needed to support stakeholders outside DHCF like HIE/CRISP plus the new DC Hospital PH systems.

**Progress Assessment:**

The project to date has progressed as planned.

**Related Projects:**

MPM03C-MMIS UPGRADED SYSTEM

(Dollars in Thousands)

Phase	Funding By Phase - Prior Funding						Approved Funding					
	Allotments	Spent	Enc/ID-Adv	Pre-Enc	Balance	FY 2020	FY 2021	FY 2022	FY 2023	FY 2024	FY 2025	6 Yr Total
(06) IT Requirements Development/Systems Design	11,743	9,461	128	0	2,154	400	0	0	0	0	0	400
<b>TOTALS</b>	<b>11,743</b>	<b>9,461</b>	<b>128</b>	<b>0</b>	<b>2,154</b>	<b>400</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>400</b>

Source	Funding By Source - Prior Funding						Approved Funding					
	Allotments	Spent	Enc/ID-Adv	Pre-Enc	Balance	FY 2020	FY 2021	FY 2022	FY 2023	FY 2024	FY 2025	6 Yr Total
GO Bonds - New (0300)	1,086	977	34	0	75	0	0	0	0	0	0	0
Pay Go (0301)	1,657	1,648	9	0	0	0	0	0	0	0	0	0
Short-Term Bonds – (0304)	0	0	0	0	0	400	0	0	0	0	0	400
Federal (0350)	9,000	6,836	85	0	2,079	0	0	0	0	0	0	0
<b>TOTALS</b>	<b>11,743</b>	<b>9,461</b>	<b>128</b>	<b>0</b>	<b>2,154</b>	<b>400</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>400</b>

Additional Appropriation Data	
First Appropriation FY	2013
Original 6-Year Budget Authority	11,800
Budget Authority Through FY 2024	11,743
FY 2019 Budget Authority Changes	0
6-Year Budget Authority Through FY 2024	11,743
Budget Authority Request Through FY 2025	12,143
Increase (Decrease)	400

Estimated Operating Impact Summary							
Expenditure (+) or Cost Reduction (-)	FY 2020	FY 2021	FY 2022	FY 2023	FY 2024	FY 2025	6 Yr Total
No estimated operating impact							

Milestone Data	Projected	Actual
Environmental Approvals		
Design Start (FY)	01/1/2013	09/1/2013
Design Complete (FY)		02/1/2016
Construction Start (FY)		01/1/2014
Construction Complete (FY)	09/1/2025	
Closeout (FY)	09/30/2025	

Full Time Equivalent Data			
Object	FTE	FY 2020 Budget	% of Project
Personal Services	0.0	0	0.0
Non Personal Services	0.0	400	100.0

# HT0-CM102-REPLACE CASE MANAGEMENT SYSTEM

**Agency:** DEPARTMENT OF HEALTH CARE FINANCE (HT0)  
**Implementing Agency:** DEPARTMENT OF HEALTH CARE FINANCE (HT0)  
**Project No:** CM102  
**Ward:**  
**Location:** DISTRICT-WIDE  
**Facility Name or Identifier:** INFORMATION TECHNOLOGY  
**Status:** Ongoing Subprojects  
**Useful Life of the Project:** 5  
**Estimated Full Funding Cost:** \$5,707,000

## Description:

Implementation of a case management system to track the activities related to beneficiaries enrolled in the EPD Waiver and other programs managed by DHCF. This proposal is to replace the existing case management system with one that can track EPD Waiver beneficiaries as well as those in other DHCF managed programs, has all of the additional functionality needed, and is integrated with the claims processing system (MMIS). DHCF's current case management system for tracking beneficiaries in the waiver for the elderly and people with disabilities (EPD Waiver) is antiquated, lacks key functionality, and is not integrated with MMIS. Additionally, in December 2016, Congress enacted the 21st Century Cures Act. Section 12006 of the Act requires States to implement electronic visit verification (EVV) for Medicaid-financed Personal Care Services and Home Health Services.

## Justification:

Implementation of the Case Management System would enable DHCF to track the activities related to beneficiaries enrolled in the EPD Waiver and other programs managed by DHCF. DHCF's current case management system for tracking beneficiaries in the waiver for the elderly and people with disabilities (EPD Waiver) lacks key functionality, and is not integrated with the claims processing system (MMIS).

## Progress Assessment:

On-going project

## Related Projects:

MPM03C-MMIS Upgraded System

(Dollars in Thousands)

Funding By Phase - Prior Funding						Approved Funding						
Phase	Allotments	Spent	Enc/ID-Adv	Pre-Enc	Balance	FY 2020	FY 2021	FY 2022	FY 2023	FY 2024	FY 2025	6 Yr Total
(01) Design	5,482	3,454	15	0	2,013	0	0	0	0	0	0	0
(04) Construction	150	0	0	0	150	75	0	0	0	0	0	75
<b>TOTALS</b>	<b>5,632</b>	<b>3,454</b>	<b>15</b>	<b>0</b>	<b>2,163</b>	<b>75</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>75</b>

Funding By Source - Prior Funding						Approved Funding						
Source	Allotments	Spent	Enc/ID-Adv	Pre-Enc	Balance	FY 2020	FY 2021	FY 2022	FY 2023	FY 2024	FY 2025	6 Yr Total
GO Bonds - New (0300)	1,207	1,021	8	0	177	0	0	0	0	0	0	0
Short-Term Bonds - (0304)	150	0	0	0	150	75	0	0	0	0	0	75
Federal (0350)	4,275	2,432	7	0	1,836	0	0	0	0	0	0	0
<b>TOTALS</b>	<b>5,632</b>	<b>3,454</b>	<b>15</b>	<b>0</b>	<b>2,163</b>	<b>75</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>75</b>

## Additional Appropriation Data

First Appropriation FY	2015
Original 6-Year Budget Authority	5,157
Budget Authority Through FY 2024	5,632
FY 2019 Budget Authority Changes	0
6-Year Budget Authority Through FY 2024	5,632
Budget Authority Request Through FY 2025	5,707
Increase (Decrease)	75

## Estimated Operating Impact Summary

Expenditure (+) or Cost Reduction (-)	FY 2020	FY 2021	FY 2022	FY 2023	FY 2024	FY 2025	6 Yr Total
No estimated operating impact							

## Milestone Data

	Projected	Actual
Environmental Approvals		
Design Start (FY)	05/16/2017	05/16/2017
Design Complete (FY)	01/31/2020	
Construction Start (FY)	10/1/2017	
Construction Complete (FY)	09/30/2020	
Closeout (FY)	09/30/2020	

## Full Time Equivalent Data

Object	FTE	FY 2020 Budget	% of Project
Personal Services	0.0	0	0.0
Non Personal Services	0.0	75	100.0

# HT0-UMV01-SAINT ELIZABETHS MEDICAL CENTER

**Agency:** DEPARTMENT OF HEALTH CARE FINANCE (HT0)  
**Implementing Agency:** DEPARTMENT OF HEALTH CARE FINANCE (HT0)  
**Project No:** UMV01  
**Ward:** 8  
**Location:** 2700 MARTIN LUTHER KING JR AVENUE SE  
**Facility Name or Identifier:** MEDICAL CENTER  
**Status:** Ongoing Subprojects  
**Useful Life of the Project:** 30  
**Estimated Full Funding Cost:** \$325,500,000

**Description:**

The Office of the City Administrator, in coordination with the Department of Health Care Finance, Department of Health, and the Office of the Deputy Mayor for Planning and Economic Development, will develop a plan to partner with a financially strong, high quality health care institution to build a new acute care hospital and ancillary facilities on the Saint Elizabeths East Campus. The hospital shall include a financially viable inpatient facility, emergency department and ambulatory care pavilion, parking, retail, medical office space and necessary diagnostic facilities for all District residents. The final hospital size and services to be provided will be determined in coordination with the future hospital partner and long-term operator and based on the reports completed on behalf of the District.

The hospital will include partnerships with community providers to build a system of care and comprehensive strategy for providing high quality health services to all District residents – with a focus on the residents and communities of Wards 7 and 8. In addition, constructing a state-of-the-art hospital on the grounds of the Saint Elizabeths East campus may include entering into a public-private partnership agreement with a private operator.

**Justification:**

Building a new hospital with a robust system of care will help address health disparities and improve health outcomes for all District residents, with a focus on residents of Wards 7 and 8. In addition, construction of a state-of-the-art, centrally located, hospital will continue the redevelopment of the Saint Elizabeths East campus.

**Progress Assessment:**

On-going project

**Related Projects:**

- Emergency and Temporary Housing for Men (Project THK19C) – Building a new facility for emergency and temporary housing for men will replace the current facility, 801 East Men’s Homeless Shelter. The new facility on the Saint Elizabeths campus is necessary to provide high quality emergency and temporary housing for men with daytime and health services. The current facility is beyond its useful life and cannot accommodate the necessary programming space needed to effectively serve residents experiencing homelessness. Building a new facility will allow the new hospital to be situated appropriately on Parcel 2 of the Saint Elizabeths campus.
- Saint Elizabeths Infrastructure (Project AWR01C)

(Dollars in Thousands)

Funding By Phase - Prior Funding						Approved Funding						
Phase	Allotments	Spent	Enc/ID-Adv	Pre-Enc	Balance	FY 2020	FY 2021	FY 2022	FY 2023	FY 2024	FY 2025	6 Yr Total
(04) Construction	8,700	0	5,000	0	3,700	35,000	83,000	198,800	0	0	0	316,800
<b>TOTALS</b>	<b>8,700</b>	<b>0</b>	<b>5,000</b>	<b>0</b>	<b>3,700</b>	<b>35,000</b>	<b>83,000</b>	<b>198,800</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>316,800</b>

  

Funding By Source - Prior Funding						Approved Funding						
Source	Allotments	Spent	Enc/ID-Adv	Pre-Enc	Balance	FY 2020	FY 2021	FY 2022	FY 2023	FY 2024	FY 2025	6 Yr Total
GO Bonds - New (0300)	0	0	0	0	0	33,000	25,000	0	0	0	0	58,000
Pay Go (0301)	0	0	0	0	0	2,000	0	0	0	0	0	2,000
Taxable Bonds – (0309)	8,700	0	5,000	0	3,700	0	58,000	198,800	0	0	0	256,800
<b>TOTALS</b>	<b>8,700</b>	<b>0</b>	<b>5,000</b>	<b>0</b>	<b>3,700</b>	<b>35,000</b>	<b>83,000</b>	<b>198,800</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>316,800</b>

**Additional Appropriation Data**

First Appropriation FY	2018
Original 6-Year Budget Authority	300,000
Budget Authority Through FY 2024	325,800
FY 2019 Budget Authority Changes	
Capital Reprogrammings FY 2019 YTD	-300
6-Year Budget Authority Through FY 2024	325,500
Budget Authority Request Through FY 2025	325,500
Increase (Decrease)	0

**Estimated Operating Impact Summary**

Expenditure (+) or Cost Reduction (-)	FY 2020	FY 2021	FY 2022	FY 2023	FY 2024	FY 2025	6 Yr Total
No estimated operating impact							

**Milestone Data**

	Projected	Actual
Environmental Approvals		
Design Start (FY)		
Design Complete (FY)		
Construction Start (FY)		
Construction Complete (FY)		
Closeout (FY)		

**Full Time Equivalent Data**

Object	FTE	FY 2020 Budget	% of Project
Personal Services	0.0	0	0.0
Non Personal Services	0.0	35,000	100.0

# HT0-UMC02-UNITED MEDICAL CENTER IMPROVEMENTS

**Agency:** DEPARTMENT OF HEALTH CARE FINANCE (HT0)  
**Implementing Agency:** DEPARTMENT OF HEALTH CARE FINANCE (HT0)  
**Project No:** UMC02  
**Ward:** 8  
**Location:** 1310 SOUTHERN AVENUE SE  
**Facility Name or Identifier:** UNITED MEDICAL CENTER  
**Status:** Ongoing Subprojects  
**Useful Life of the Project:** 30  
**Estimated Full Funding Cost:** \$81,593,000

**Description:**

The purpose of the project budget is to support the costs of capital improvements at the existing hospital facility, United Medical Center (UMC). The proposed cost and scope of the improvements should be reviewed and approved by DHCF and will be performed by UMC management.

**Justification:**

Huron Consulting Group states that "UMC Facilities are in relatively good condition" and that "investments to make the facilities competitive without other District providers could differentiate UMC and attract (Primary Service Area) PSA residents."

**Progress Assessment:**

On-going project

**Related Projects:**

UMV01C-East End Medical Center

(Dollars in Thousands)

Funding By Phase - Prior Funding						Approved Funding						
Phase	Allotments	Spent	Enc/ID-Adv	Pre-Enc	Balance	FY 2020	FY 2021	FY 2022	FY 2023	FY 2024	FY 2025	6 Yr Total
(00) Feasibility Studies	41,501	40,720	780	0	0	0	0	0	0	0	0	0
(04) Construction	30,292	16,237	14,007	0	48	4,500	3,000	0	0	0	0	7,500
<b>TOTALS</b>	<b>71,793</b>	<b>56,957</b>	<b>14,787</b>	<b>0</b>	<b>48</b>	<b>4,500</b>	<b>3,000</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>7,500</b>

Funding By Source - Prior Funding						Approved Funding						
Source	Allotments	Spent	Enc/ID-Adv	Pre-Enc	Balance	FY 2020	FY 2021	FY 2022	FY 2023	FY 2024	FY 2025	6 Yr Total
GO Bonds - New (0300)	50,555	40,720	9,834	0	0	4,500	3,000	0	0	0	0	7,500
Pay Go (0301)	21,238	16,237	4,953	0	48	0	0	0	0	0	0	0
<b>TOTALS</b>	<b>71,793</b>	<b>56,957</b>	<b>14,787</b>	<b>0</b>	<b>48</b>	<b>4,500</b>	<b>3,000</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>7,500</b>

Additional Appropriation Data	
First Appropriation FY	2015
Original 6-Year Budget Authority	52,383
Budget Authority Through FY 2024	81,593
FY 2019 Budget Authority Changes	0
6-Year Budget Authority Through FY 2024	81,593
Budget Authority Request Through FY 2025	79,293
Increase (Decrease)	-2,300

Estimated Operating Impact Summary							
Expenditure (+) or Cost Reduction (-)	FY 2020	FY 2021	FY 2022	FY 2023	FY 2024	FY 2025	6 Yr Total
No estimated operating impact							

Milestone Data	Projected	Actual
Environmental Approvals		
Design Start (FY)		
Design Complete (FY)		
Construction Start (FY)		
Construction Complete (FY)		
Closeout (FY)		

Full Time Equivalent Data			
Object	FTE	FY 2020 Budget	% of Project
Personal Services	0.0	0	0.0
Non Personal Services	0.0	4,500	100.0