

**STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH**

COMPLIANCE EXAMINATION

For the Two Years Ended June 30, 2005

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
COMPLIANCE EXAMINATION
For the Two Years Ended June 30, 2005

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AGENCY OFFICIALS

Director	Eric E. Whitaker, M.D., M.P.H.
Assistant Director	Jonathan Dopkeen
Deputy Directors:	
Office of Policy, Planning, & Statistics (Formerly the Office of Epidemiology and Health Systems Development)	David Carvalho
Office of Finance and Administration	Gary T. Robinson
Office of Health Care Regulation	Enrique Unanue
Office of Women's Health	Sharon Green (7/1/03 through 11/15/05) Jan Costello (11/16/05 through current)
Office of Preparedness and Response	Cathy Stokes (Acting) (7/1/03 through 12/15/05) Joseph Bodgan (12/16/05 through current)
Office of Health Promotion	Charles Jackson (7/1/03 through 5/15/04) Claude-Alix Jacob (1/10/05 through current)
Office of Health Protection	Tom Hughes
Fiscal Officer	Gary T. Robinson (Acting)
Legal Counsel	Anne Murphy (7/1/03 through 7/7/05) Marilyn Thomas (7/8/05 through current)

Agency offices are located at:

525-535 W. Jefferson Street
Springfield, Illinois 62761



Rod R. Blagojevich, Governor
Eric E. Whitaker, M.D., M.P.H., Director

525-535 West Jefferson Street • Springfield, Illinois 62761-0001 • www.idph.state.il.us

January 6, 2006

Honorable William G. Holland
Auditor General
State of Illinois
740 East Ash
Springfield, IL 62703

We are responsible for the identification of, and compliance with, all aspects of laws, regulations, contracts, or grant agreements that could have a material effect on the operations of the Department of Public Health (Department). We are responsible for and we have established and maintained an effective system of, internal controls over compliance requirements. We have performed an evaluation of the Department's compliance with the following assertions during the two-year period ended June 30, 2005. Based on this evaluation, we assert that during the years ended June 30, 2004 and June 30, 2005, the Department has materially complied with the assertions below.

The Department has obligated, expended, received and used public funds of the State in accordance with the purpose for which such funds have been appropriated or otherwise authorized by law.

The Department has obligated, expended, received and used public funds of the State in accordance with any limitations, restrictions, conditions or mandatory directions imposed by law upon such obligation, expenditure, receipt or use.

The Department has complied, in all material respects, with applicable laws and regulations, including the State uniform accounting system, in its financial and fiscal operations.

The State revenues and receipts collected by the Department are in accordance with applicable laws and regulations and the accounting and recordkeeping of such revenues and receipts is fair, accurate and in accordance with law.

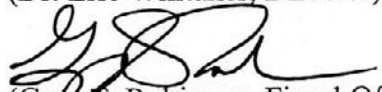
The money or negotiable securities or similar assets handled by the Department on behalf of the State or held in trust by the Department have been properly and legally administered, and the accounting and recordkeeping relating thereto is proper, accurate and in accordance with law.

Yours very truly,

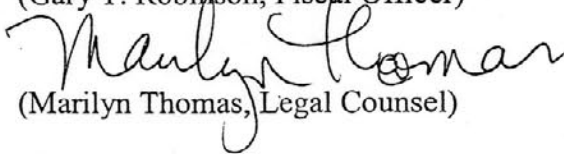
Department of Public Health



(Dr. Eric Whitaker, Director)



(Gary T. Robinson, Fiscal Officer)



(Marilyn Thomas, Legal Counsel)

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
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COMPLIANCE REPORT

SUMMARY

The compliance testing performed during this examination was conducted in accordance with *Government Auditing Standards* and in accordance with the Illinois State Auditing Act.

AUDITORS' REPORT

The Independent Accountants' Report on State Compliance, on Internal Control Over Compliance and on Supplementary Information for State Compliance Purposes does not contain scope limitations, disclaimers, or other significant non-standard language.

SUMMARY OF FINDINGS

<u>Number of</u>	<u>This Report</u>	<u>Prior Report</u>
Findings	16	8
Repeated findings	7	2
Prior recommendations implemented or not repeated	1	5

Details of findings are presented in a separately tabbed report section.

SCHEDULE OF FINDINGS

<u>Item No.</u>	<u>Page</u>	<u>Description</u>
FINDINGS (STATE COMPLIANCE)		
05-1	10	Efficiency initiative payments
05-2	14	Noncompliance with the State Officials and Employees Ethics Act
05-3	15	GAAP reporting
05-4	17	Inaccurate capital asset reporting
05-5	19	Computer security and administration deficiencies
05-6	22	Lack of disaster recovery planning and testing for computer systems

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05-7	24	Lack of independent reviews of computer systems
05-8	26	Reporting requirements
05-9	28	Youth Camp inspections not performed and licenses not issued
05-10	30	Noncompliance with the Illinois Migrant Labor Camp Law
05-11	32	Noncompliance with Innovations in Long-term Care Quality Grants Act
05-12	33	Failure to file timely and accurate TA-2 Reports
05-13	34	Voucher processing weaknesses
05-14	35	Stroke Task Force not created timely and noncompliance with reporting requirements
05-15	36	Field sanitation fines not being assessed
05-16	37	Program Audit of the Illinois Health Facilities Planning Board

PRIOR FINDINGS NOT REPEATED (STATE COMPLIANCE)

05-17	41	Internal audit requirements
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EXIT CONFERENCE

The findings and recommendations appearing in this report were discussed with Department personnel at an exit conference on March 15, 2006. Attending were:

Department of Public Health

Eric E. Whitaker, M.D., M.P.H., Director (via telephone)
Quin Golden, Chief of Staff (via telephone)
Gary Robinson, Deputy Director of Finance and Administration
Penny Bush, Accounting/Fiscal Manager
Tayseer Rehan, Accounting/Federal
Kevin Rademacher, IT Division Chief

Office of the Auditor General

Teresa Davis, Compliance Audit Manager
Kathy Lovejoy, Information Systems Audit Manager
Matt Campbell, Compliance Audit Supervisor

Responses to the recommendations were provided by Gary Robinson of the Department of Public Health in a letter dated March 24, 2006.

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OFFICE OF THE AUDITOR GENERAL
WILLIAM G. HOLLAND

INDEPENDENT ACCOUNTANTS' REPORT ON STATE COMPLIANCE,
ON INTERNAL CONTROL OVER COMPLIANCE, AND ON
SUPPLEMENTARY INFORMATION FOR STATE COMPLIANCE PURPOSES

Honorable William G. Holland
Auditor General
State of Illinois

Compliance

We have examined the State of Illinois, Department of Public Health's compliance with the requirements listed below, as more fully described in the Audit Guide for Financial Audits and Compliance Attestation Engagements of Illinois State Agencies (Audit Guide) as adopted by the Auditor General, during the two years ended June 30, 2005. The management of the State of Illinois, Department of Public Health is responsible for compliance with these requirements. Our responsibility is to express an opinion on the State of Illinois, Department of Public Health's compliance based on our examination.

- A. The State of Illinois, Department of Public Health has obligated, expended, received, and used public funds of the State in accordance with the purpose for which such funds have been appropriated or otherwise authorized by law.
- B. The State of Illinois, Department of Public Health has obligated, expended, received, and used public funds of the State in accordance with any limitations, restrictions, conditions or mandatory directions imposed by law upon such obligation, expenditure, receipt or use.
- C. The State of Illinois, Department of Public Health has complied, in all material respects, with applicable laws and regulations, including the State uniform accounting system, in its financial and fiscal operations.
- D. The State revenues and receipts collected by the State of Illinois, Department of Public Health are in accordance with applicable laws and regulations and the accounting and recordkeeping of such revenues and receipts is fair, accurate and in accordance with law.
- E. Money or negotiable securities or similar assets handled by the State of Illinois, Department of Public Health on behalf of the State or held in trust by the State of Illinois, Department of Public Health have been properly and legally administered and the accounting and recordkeeping relating thereto is proper, accurate, and in accordance with law.

Our examination was conducted in accordance with attestation standards established by the American Institute of Certified Public Accountants; the standards applicable to attestation engagements contained in *Government Auditing Standards* issued by the Comptroller General of the United States; the Illinois State Auditing Act (Act); and the Audit Guide as adopted by the Auditor General pursuant to the Act; and, accordingly, included examining, on a test basis, evidence about the State of Illinois, Department of Public Health's compliance with those requirements and performing such other procedures as we considered necessary in the circumstances. We believe that our examination provides a reasonable basis for our opinion. Our examination does not provide a legal determination on the State of Illinois, Department of Public Health's compliance with specified requirements.

In our opinion, the State of Illinois, Department of Public Health complied, in all material respects, with the aforementioned requirements during the two years ended June 30, 2005. However, the results of our procedures disclosed instances of noncompliance with those requirements, which are required to be reported in accordance with criteria established by the Audit Guide, issued by the Illinois Office of the Auditor General and which are described in the accompanying schedule of State findings as findings 05-1, 05-2, 05-3, 05-4, 05-7, 05-8, 05-9, 05-10, 05-11, 05-12, 05-13, 05-14, 05-15 and 05-16.

As required by the Audit Guide, immaterial findings relating to instances of noncompliance excluded from this report have been reported in a separate letter.

Internal Control

The management of the State of Illinois, Department of Public Health is responsible for establishing and maintaining effective internal control over compliance with the requirements of laws and regulations. In planning and performing our examination, we considered the State of Illinois, Department of Public Health's internal control over compliance with the aforementioned requirements in order to determine our examination procedures for the purpose of expressing our opinion on compliance and to test and report on internal control over compliance in accordance with the Audit Guide, issued by the Illinois Office of the Auditor General.

Our consideration of internal control over compliance with the aforementioned requirements would not necessarily disclose all matters in internal control that might be material weaknesses. A material weakness is a condition in which the design or operation of one or more internal control components does not reduce to a relatively low level the risk that noncompliance with applicable requirements of laws and regulations that would be material in relation to one or more of the aforementioned requirements being examined may occur and not be detected within a timely period by employees in the normal course of performing their assigned functions. We noted no matters involving internal control over compliance that we consider to be material weaknesses. However, the results of our procedures disclosed other matters involving internal control which are required to be reported in accordance with criteria established by the Audit Guide, issued by the Illinois Office of the Auditor General and which are described in the accompanying schedule of State findings as findings 05-1, 05-2, 05-3, 05-4, 05-5, 05-6, 05-7, 05-9, 05-10, 05-14 and 05-16.

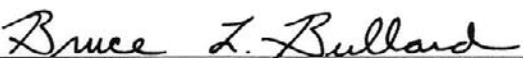
As required by the Audit Guide, immaterial findings relating to internal control deficiencies excluded from this report have been reported in a separate letter.

Supplementary Information for State Compliance Purposes

Our examination was conducted for the purpose of forming an opinion on compliance with the requirements listed in the first paragraph of this report. The accompanying supplementary information as listed in the table of contents as Supplementary Information for State Compliance Purposes is presented for purposes of additional analysis. We have applied certain limited procedures as prescribed by the Audit Guide as adopted by the Auditor General to the 2004 and the 2005 Supplementary Information for State Compliance Purposes, except for information on the Service Efforts and Accomplishments on which we did not perform any procedures. However, we do not express an opinion on the supplementary information.

We have not applied procedures to the 2003 Supplementary Information for State Compliance Purposes, and accordingly, we do not express an opinion thereon.

This report is intended solely for the information and use of the Auditor General, the General Assembly, the Legislative Audit Commission, the Governor, and agency management, and is not intended to be and should not be used by anyone other than these specified parties.



Bruce L. Bullard, CPA
Director of Financial and Compliance Audits

January 6, 2006

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
SCHEDULE OF FINDINGS (STATE COMPLIANCE)
For the Two Years Ended June 30, 2005

05-1. **FINDING** (Efficiency initiative payments)

The Department of Public Health (Department) made payments for efficiency initiative billings from improper line item appropriations.

Public Act 93-0025, in part, outlines a program for efficiency initiatives to reorganize, restructure and reengineer the business processes of the State. The State Finance Act details that the amount designated as savings from efficiency initiatives implemented by the Department of Central Management Services (CMS) shall be paid into the Efficiency Initiatives Revolving Fund. **“State agencies shall pay these amounts...from the line item appropriations where the cost savings are anticipated to occur.”** (30 ILCS 105/6p-5)

The Department received three FY04 billings and two billings in FY05 for savings from efficiency initiatives. The initiatives and amounts billed to the Department for FY04 and FY05 were:

<u>INVOICE BILLING DATE</u>	INITIATIVE	<u>BILLED AMOUNT</u>
<u>FY04</u>		
9/19/03	Procurement Efficiency	\$ 1,686,578.00
9/19/03	Information Technology	\$ 804,592.00
9/19/03	Vehicle Fleet Management	\$ 30,470.00
<u>FY05</u>		
1/19/05	Procurement Efficiency	\$ 174,379.49
5/2/05	Information Technology	\$ 757,929.00
Grand Total FY04-FY05:		\$ 3,453,948.49

The Department could not provide documentation on any guidance for the FY04 billings from CMS detailing where savings were to occur nor did CMS provide evidence of savings for the amounts billed. Department staff reported they had not experienced any significant savings from the efficiency initiatives.

Based on our review, we question whether the appropriate appropriations, as required by the State Finance Act, were used to pay for the anticipated savings. We found that the Department made payments in FY04 for these billings **not** from line item appropriations where the cost savings were anticipated to have occurred but based on an attempt to spread the payments across different funds to encompass the Department as a whole. However, without specific guidance from CMS regarding the nature and type of savings initiatives, it is unclear whether these were the appropriate lines from which to make procurement savings payments.

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SCHEDULE OF FINDINGS (STATE COMPLIANCE)
For the Two Years Ended June 30, 2005

During FY04, 53 percent of the payments (\$1,330,737) to CMS were from lump sum monies appropriated to the Department for specific purposes. For the FY04 payments we found:

- The Department paid \$235,000 toward the procurement and information technology initiative billings from a lump sum appropriation to the Division of Information Technology. The monies were specifically appropriated for “Expenses Associated with the Childhood Immunization Program.” The payment to CMS amounted to 47 percent of the total appropriated for this purpose.
- The Department paid \$86,400 toward the procurement billing from a lump sum appropriation to the Division of Health Protection. The specific appropriation was for “expenses of mosquito abatement in an effort to curb the spread of West Nile Virus.”
- The Department paid \$79,100 toward the procurement billing from a lump sum appropriation to the Division of Health Promotion. The monies were specifically appropriated for “Operational Expenses for Metabolic Screening Follow-up Services.” The payment to CMS amounted to 7 percent of the total appropriated for this purpose.
- The Department paid \$35,000 toward the procurement billing from monies to the Office of Finance and Administration appropriation specifically for “Grants for Development of Local Health Departments and the Public Health Workforce, including Operational Expenses.” The payment to CMS amounted to 16 percent of the total appropriated for this purpose.
- The Department paid \$683,737 toward procurement and information technology billings from personal-services related line item appropriations.
- The Department paid \$55,000 toward the procurement efficiency billing in FY04 from travel line item appropriations.

The FY05 billings from CMS contained more detail on where CMS determined the Department saved monies. However, it appears the Department paid these billings in a manner similar to the previous fiscal year. The Department paid 81 percent of the billings (\$755,268.49 of \$932,308.49) from lump sum appropriations.

The table below provides an illustration of the specific funds and line items the Department used to make payments for the efficiency initiatives. Additionally, the table illustrates which efficiency initiatives were paid from the various line item appropriations.

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
SCHEDULE OF FINDINGS (STATE COMPLIANCE)
For the Two Years Ended June 30, 2005

FUND ¹	LINE ITEM APPROPRIATION	AMOUNT PAID ²	TOTAL APPROPRIATION FOR LINE ITEM	EFFICIENCY INITIATIVE		
				PROCUREMENT	INFORMATION TECHNOLOGY	VEHICLE FLEET MANAGENET
FY04						
0001	For Personal Services	\$ 566,000.00	\$ 26,755,000.00	✓	✓	
0001	For Contributions to SERS	\$ 74,300.00	\$ 3,595,700.00	✓	✓	
0001	For Social Security	\$ 43,437.00	\$ 2,046,700.00	✓	✓	
0001, 0238	For Contractual Services	\$ 188,300.00	\$ 4,875,600.00	✓		
0001, 0238	For Travel	\$ 55,000.00	\$ 283,700.00	✓		
0001, 0238	For Equipment	\$ 178,266.00	\$ 201,700.00	✓		
0001	For Electronic Data Processing	\$ 50,000.00	\$ 665,023.00	✓		
0001, 0014, 0113 0118, 0175, 0240 0285, 0360, 0372 0524, 0635, 0920 0938	For Lump Sums & Other Purposes	\$ 1,330,737.00	\$ 23,661,000.00	✓	✓	✓
0001	Awards & Grants, Lump Sums	\$ 35,000.00	\$ 218,800.00	✓		
FY05						
0001	For Contractual Services	\$ 20,000.00	\$ 236,258.00		✓	
0001	For Electronic Data Processing	\$ 157,040.00	\$ 593,121.00		✓	
0001, 0896, 0920	For Lump Sums & Other Purposes	\$ 755,268.49	\$ 8,270,388.00	✓	✓	
¹ Legend: 0001-General Revenue Fund; 0014-Food & Drug Safety Fund 0113-Community Health Center Fund; 0118-Facility Licensing Fund 0175-IL School Asbestos Abatement Fund; 0238-IL Health Facilities Planning Fund 0240-Emergency Public Health Fund; 0285-Long Term Care Monitor/Receiver Fund 0360-Lead Poisoning, Screening, Prevention & Abatement Fund 0372-Plumbing, Licensure & Program Fund; 0524-Health Facility Plan Review Fund 0635-Death Certificate Surcharge Fund; 0896-Public Health Special State Projects Fund 0920-Metabolic Screening & Treatment Fund 0938-Hearing Instrument Dispenser Examining & Disciplinary Fund						
² The Department paid only \$1,685,978 of the \$1,686,578 billed by CMS for procurement in FY04.						

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Use of appropriations unrelated to the cost savings initiatives results in non-compliance with the State Finance Act. Furthermore, use of appropriations for purposes other than those authorized by the General Assembly effectively negates a fundamental control established in State government. Finally, use of funds unrelated to the savings initiative may result in an adverse effect on services the Department provides. (Finding Code No. 05-1)

RECOMMENDATION

We recommend that the Department only make payments for efficiency initiative billings from line item appropriations where savings would be anticipated to occur. Further, the Department should seek an explanation from the Department of Central Management Services as to how savings levels were calculated, or otherwise arrived at, and how savings achieved or anticipated impact the Department's budget.

DEPARTMENT RESPONSE

The Department concurs in the finding. As previously identified by the Auditor General in other agency compliance audits, this Department also received multiple efficiency billings from DCMS in FY04 and FY05 with limited documentation. The Department did make several efficiency payments from contractual services, equipment and information technology line items that most closely aligned themselves with the efficiency initiative billings. However, without additional cost documentation, the Department allocated its remaining payments to appropriations that allowed the greatest flexibility to manage administrative costs, i.e., lump sum appropriations. Also, as the finding correctly points out, the Department did attempt to allocate payments, in addition to GRF, from other non-GRF State funds. It was our belief that the DCMS cost savings initiatives would impact administrative operations in most all of our various operating funds and not solely impact GRF appropriations. It should be noted that no federal funds or income tax check-off funds were impacted, and no service cuts were taken as a result of any efficiency payment.

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SCHEDULE OF FINDINGS (STATE COMPLIANCE)
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05-2. **FINDING** (Noncompliance with the State Officials and Employees Ethics Act)

The Department of Public Health (Department) did not comply with the State Officials and Employees Ethics Act.

During the engagement period, the Department did not have written policies and procedures for timekeeping and reporting hours worked on official State business. In addition, the timekeeping system used by the Department did not document hours spent each day on official State business by employee.

The State Officials and Employees Ethics Act (Act) (5 ILCS 430/5-5(c)) requires each State agency to develop a written policy that includes work time requirements and documentation of time worked. Additionally, the Act requires State employees to periodically submit timesheets documenting the time spent each day on official State business to the nearest quarter hour.

The Department was not aware that they were not in compliance with the State Officials and Employees Ethics Act.

Not having a written policy addressing timekeeping requirements and failing to periodically submit timesheets documenting the time spent each day on official State business is in noncompliance with State law and increases the potential that the State is paying for services that have not been performed. (Finding Code No. 05-2)

RECOMMENDATION

We recommend the Department comply with the State Officials and Employees Ethics Act by developing a written policy regarding timekeeping requirements and requiring employees to submit timesheets recording time spent on official State business to the nearest quarter hour.

DEPARTMENT RESPONSE

The Department concurs with the finding and recommendation. Although a timekeeping manual is provided to all decentralized timekeepers and employees receive a copy of the Ethics Act and other timekeeping information during new employee sign-up, a comprehensive directive on timekeeping will be issued and posted for all employees to review. In addition, the weekly time sheets currently utilized for the Central Time and Attendance (CTA) system will be modified to include employee signatures as verification of time spent on official State business to the nearest quarter hour.

STATE OF ILLINOIS
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05-3. **FINDING** (GAAP reporting)

The Department of Public Health (Department) did not correctly report financial information on the Grant/Contract Analysis (SCO-563) form to the Office of the State Comptroller. The Department prepares a separate SCO-563 form for six funds. We noted the following errors:

- The Department did not calculate (estimate) deferred revenues correctly for federal grants on one SCO-563 form. The Department received an additional \$1.798 million in revenues during the first 60 days of the next fiscal year, resulting in the Department overstating deferred revenues and understating revenues by \$1.798 million.

The Statewide Accounting Management System (SAMS) (Procedure 3.20.20) indicates that the Department should recognize revenues in accordance with Governmental Accounting Standards Board (GASB) Statement No. 33 *Accounting and Financial Reporting for Nonexchange Transactions*. GASB No. 33 sets forth the current procedures, which states that revenues are to be recognized, as they are both measurable and available when they are collected within the current period or soon thereafter to pay liabilities of the current period. For this purpose, the State of Illinois considers revenues to be available if they are collected within 60 days of the end of the current fiscal year.

- The Department did not include a non-cash award on one SCO-563 form. The non-cash award was for commodities received from the federal government totaling \$24.575 million. As a result of the Department not including this non-cash award on the SCO-563, the Department also did not recognize the revenue and expenditure of the non-cash award in the GAAP Package.

The Statewide Accounting Management System (SAMS) (Procedure 27.20.63) indicates that the value of non-cash assistance distributed must be reported as revenues and expenditures on the SCO-563 form. In addition, SAMS (Procedure 27.20.63) also requires those non-cash awards be recognized as revenue and expenditures in the GAAP Package.

Department personnel indicated that they believe that the estimated value of deferred revenue was accurate. In regard to the non-cash award, Department personnel indicated that they were unaware of the requirement to record non-cash awards on the SCO-563 form or in the GAAP Package.

Failure to submit correct information to the Office of the State Comptroller increases the risk that the Statewide Financial Statements will not be fairly stated. (Finding Code No. 05-3, 03-6)

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
SCHEDULE OF FINDINGS (STATE COMPLIANCE)
For the Two Years Ended June 30, 2005

RECOMMENDATION

We recommend the Department comply with SAMS and Governmental Accounting Standards Board requirements to ensure accurate financial information is submitted to the Office of the State Comptroller. Further, the Department should review and revise as necessary its current system used to gather and document the financial information that will be reported in the Office of the State Comptroller generally accepted accounting principles (GAAP) Reporting Package Forms.

DEPARTMENT RESPONSE

The Department concurs with the finding and recommendation. The Department calculated the deferred revenue based on the availability of funds at the time of the GAAP package completion (August 26, 2005) without taking in consideration the funds that could be available during the last five days of the lapse period. We have changed our process to have an estimate for the revenue that will be made available during the remainder of the lapse period. The Department was under the assumption that only cash assistance is reportable on the SCO-563. We have also changed our process to report all non-cash awards or any direct assistance received from the federal government on the SCO-563 and recognize it as revenue and expenditure in the GAAP package.

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
SCHEDULE OF FINDINGS (STATE COMPLIANCE)
For the Two Years Ended June 30, 2005

05-4. **FINDING** (Inaccurate capital asset reporting)

The Department of Public Health (Department) did not accurately report capital asset information on the Capital Asset Summary (SCO-538) form to the Office of the State Comptroller for fiscal year 2005. The Department did not utilize property records as of June 30, 2005 when preparing the SCO-538. As a result, we noted the following errors:

- The Department reported incorrect amounts for additions to capital assets. The additions to capital assets on the SCO-538 were reported as \$1,342,000. However, the Department's records indicated that the additions for the year ended June 30, 2005 should have been \$1,603,000. This resulted in an understatement of \$261,000 in additions on the SCO-538.
- The Department's ending capital asset balance at June 30, 2005 did not agree to property records maintained by the Department. The Department reported the ending balance on the SCO-538 as being \$15,146,000. However, the Department's property records indicated that the capital asset balance at June 30, 2005 was \$16,340,000. This resulted in an understatement of \$1,194,000 in the capital asset ending balance at June 30, 2005.
- As a result of the additions and ending balance being incorrect, the beginning balance for capital assets on the SCO-538 was also incorrect. We restated the beginning balance to \$15,817,000 from \$14,884,000.
- The Department did not accurately report capital outlays for seven funds on the SCO-538. The Department did not record assets not being capitalized correctly on the SCO-538, which resulted in an understatement of capitalized assets of \$212,000. Additionally, the Department did not accurately report accounts payable for five of the seven funds on the SCO-538, which resulted in a net understatement of payables of \$49,000. Overall these errors resulted in a net understatement of capital outlays of \$261,000.

According to the Statewide Accounting Management System (SAMS) (Procedure 27.20.38) all capital assets meeting the capitalization threshold (i.e. equipment being \$5,000) are required to be reported on the SCO-538. Additionally, SAMS (Procedure 27.20.38) states that the SCO-538's Capital Outlay Reconciliation section reflect amounts not being capitalized, which are those items that do not meet the capitalization threshold (i.e. expenditures less than \$5,000). Further, SAMS (Procedure 27.20.38) states that payables relating to capital expenditures should be reported on the SCO-538 in the Capital Outlay Reconciliation Section. Finally, good business practices dictate that capital asset information reported to the Comptroller reconcile to agency records.

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Department personnel indicated that it used outdated capital asset information when completing the SCO-538, GAAP Capital Asset Summary. This information did not include all relevant object codes related to equipment purchases during the year, which resulted in inaccurate reporting of capital assets and capital outlays. (Finding Code No. 05-4)

RECOMMENDATION

We recommend the Department report Capital Assets accurately and in accordance with the procedures outlined in the SAMS manual to ensure that capital asset information is accurately reported to the Office of the State Comptroller. Further, we recommend the Department utilize updated capital asset information when preparing the Capital Asset Summary.

DEPARTMENT RESPONSE

The Department concurs with the finding and recommendation. Due to new staff preparing this report and being unfamiliar with where the data was drawn from, the SCO-538 was not consistent with the Department's expenditure records. Since that time, staff now know all accurate reporting procedures and policies. New reports have been created to ensure that all equipment and commodity purchases are now reflected on agency reports and are used on the SCO-538. Reconciliation reports have also been implemented to ensure that all relevant detail object codes are captured and all capitalization thresholds are accurate.

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05-5. **FINDING** (Computer security and administration deficiencies)

The Department of Public Health (Department) had deficiencies in the security and administration of its computer resources.

The Department relies greatly on computer systems to fulfill its mission to promote the health of the people of Illinois through the prevention and control of disease and injury. The Department collected, maintained, and stored a significant amount of sensitive information.

During our review, we identified the following computer security weaknesses related to one of the Department's legacy systems:

- Security parameters that did not comply with the Department's information technology policies;
- Default passwords that had not been changed;

Additionally, during our review we identified the following computer security weaknesses relating to the Department's network environment:

- Accounts with no password requirements, no password change interval, no password history maintained, and unlimited number of grace logins;
- Accounts not disabled or deleted for terminated employees within timeframes outlined by Department policy;
- Inappropriate patch levels maintained;
- Lack of computer security awareness, auditing and monitoring.

The Department was unaware of instances where poor security configurations or unchanged default passwords had been exploited on a legacy system. However, since auditing and monitoring capabilities were disabled, a mechanism for identifying unauthorized access was not in place. Therefore, security violations may go undetected.

We found a lack of awareness of security policies and the Department did not require users to periodically review and sign the acceptable usage policy.

Additionally, during our review, the Department provided a test account with access rights comparable to the privileges issued to a standard external user. With this user account, we were able to obtain a significant amount of sensitive information (which could compromise computer security), which should not have been available to the type of user account being tested. The information included, but was not limited to:

- Business continuity plans;
- Network diagrams; and
- Server configuration listings.

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Management stated due to staffing shortages manual auditing and monitoring tasks were not performed as required and security policies and procedures have not been updated to meet the changing environments.

The Department collects and utilizes a great deal of confidential information, including personal medical information. For the security of the Department's information resources, and for the privacy of Illinois citizens, it is essential the Department implement adequate security and administration controls over its computer resources. Reasonable precautions should also be taken to ensure information that can be used to compromise the Department's resources is not disclosed to individuals who do not need access to such information. (Finding Code No. 05-5)

RECOMMENDATION

To protect the security and integrity of the Department's resources, and to protect the privacy of citizens of the State of Illinois, the Department should:

- Thoroughly review security parameters and access privileges to all sensitive information.
- Properly protect information that can be used to compromise IT security and limit access only to individuals who require access to perform job duties.
- Activate auditing and monitoring options to assist in detecting security violations.
- Ensure employees review security policies and procedures at least annually and sign a statement acknowledging they have read, understand, and agree to comply with the policies and procedures.

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DEPARTMENT RESPONSE

The Department concurs with the recommendations and has taken the following steps to ensure the issues defined will be resolved.

- Security issues raised concerning the legacy system have been modified to meet standards with documented acceptable exceptions.
- IT Security continues to coordinate efforts with IT Coordinators throughout the Department with regard to user account maintenance to include both reporting of security parameter standards by account and associated rights for data to insure that access is limited based upon job duties.
- Access to sensitive information posted to the Department's Intranet such as Communicable Disease data, Personnel, Accounting and Business Continuity plans has been restricted to provide appropriate levels of disclosure based upon function or role.
- The Department will continue to work with CMS to ensure network monitoring is adequate based on these findings.
- Lack of security awareness is being resolved via coordination with the Department's Training Center staff to include security awareness training along with other mandatory training for employees.

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05-6. **FINDING** (Lack of disaster recovery planning and testing for computer systems)

The Department of Public Health (Department) did not have a current Disaster Recovery Plan (Plan) and had not performed comprehensive disaster recovery testing.

The Department has identified 11 applications as Category One (directly impacts the lives and safety of citizens) on the Statewide Critical Application Listing. One of the criteria for a Category One application is the annual recovery testing at an off-site location. In June 2005, the Department conducted limited component testing on one of the critical applications. The Department had not conducted annual recovery testing at the off-site location on any other application in the last two years.

In addition, the Department had not conducted recovery testing of its local area network, which contained three critical applications. Additionally, at this time the Department would be unable to recover the web-portal and applications (this would impact the ability of local health entities to submit critical public health information to the Department), due to lack of equipment and a recovery site, if necessary.

The Department had established a Plan, which “details the precise instructions and actions required to recover the time critical information technology systems and services.” However, the Plan contained outdated information and had not been reviewed in the last year.

Additionally, the Department had not developed a disaster recovery plan for one of the Department’s Category One applications. This application maintains sensitive citizen health information, which is required to be sufficiently protected and comply with security standards and Center for Disease Control security rulings.

Information technology guidance (including the National Institute of Standards and Technology and Government Accountability Office) endorse the formal testing of disaster recovery plans. Tests of disaster recovery plans (and the associated documentation of the test results) verify that the plan, procedures and resources provide the capability to recover critical systems within the required timeframe.

Management stated due to staffing and equipment shortages the Department was limited in their ability to adequately test local area network critical applications.

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Failure to have an adequately tested and updated disaster recovery plan leaves the Department exposed to the possibility of major disruptions of services. A comprehensive test of the plan across all platforms utilized will assist management in identifying weaknesses to ensure recovery procedures are adequate in the event of a disaster. Continuous testing of plans would also assist management to ensure the plans are appropriately modified, as the Department's computing environment and disaster recovery needs change. (Finding Code No. 05-6)

RECOMMENDATION

The Department should perform and document tests of its disaster recovery plan. The tests should include all critical computing platforms and systems and should be adequately documented. Additionally, all Category One applications should be subject to annual recovery tests performed at an off-site location. The Department's Plan should be continuously updated to reflect environmental changes and improvements identified from tests.

DEPARTMENT RESPONSE

The Department concurs with the recommendations. The Department has worked diligently for the past two years defining a Business Continuity Program to protect its constantly changing programs and large number of resources and continues efforts to maintain plans for all Category One applications as they are identified. The Department will coordinate efforts with the Department of Central Management Services to perform tests on each of the current applications defined in the plan.

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05-7. **FINDING** (Lack of independent reviews of computer systems)

During the engagement period, an independent and mandated review of a major computer system was not performed.

The Department of Public Health (Department) put into service an electronic disease reporting system in order to identify unusual illness trends and to provide a defense to bio-terrorism attacks. The system reports information to the U.S. Center for Disease Control on 77 mandated reportable human diseases from the 94 local and state health departments on a weekly basis. The system maintains sensitive citizen health information, which is required to be sufficiently protected and comply with the U.S. Center for Disease Control security rulings.

The system was classified as major by the Department, was designated as a Category One application (directly impacts lives and safety of citizens), and is listed as one of the State's top priorities for recovery on the Statewide Critical Application list. The system was implemented in March 2004; however, to date an independent review has not been conducted.

The system is expected to cost approximately \$10 million, with approximately \$4 million being spent to date on contractors and hardware.

An independent review of computer system development projects or major modifications to computer systems was not performed. The Fiscal Control and Internal Auditing Act (30 ILCS 10/2003) requires reviews of the design of major new computer systems and major modifications of those systems be performed by internal auditors prior to their installation to ensure the systems provide for adequate audit trails and accountability.

In addition, generally accepted standards, such as the Control Objectives for Information and Related Technology (COBIT), call for an independent review of new and modified computer systems to ensure that systems meet integrity, accountability, and security standards. Furthermore, generally acceptable auditing standards state management should establish a plan to ensure that independent reviews assess the effectiveness and efficiency of internal control procedures and management's ability to control IT activities.

Failure to review major systems or major modifications to those systems is contrary to the intent of the Fiscal Control and Internal Auditing Act and sound business practices. The lack of independent reviews could result in undetected security or integrity problems in new or modified computer systems.

Management stated formal procedures to notify the Illinois Office of Internal Audit staff of new computer developments have not yet been established.

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The Department's computer systems support the delivery of services intended to fulfill the Department's mission to promote the health of the people of Illinois through the prevention and control of disease and injury. The efficiency, security, and integrity of the Department's computer systems is essential to the health and well being of the citizens of Illinois. (Finding Code No. 05-7)

RECOMMENDATION

The Department should ensure independent reviews of major computer systems are performed. If the Illinois Office of Internal Audit is to perform the reviews, the Department should ensure the Office is informed of all major computer system development projects.

DEPARTMENT RESPONSE

The Department concurs with the finding and recommendations. Since the consolidation of internal audit function, the Department has provided a list of projects to the Office of Internal Audit (IOIA) and coordinated efforts to perform risk assessments to determine the level of IOIA involvement during the development and implementation of each project. Several of which have been identified as requiring auditor involvement and an auditor at the IOIA has been assigned to work with Department staff based upon IS Development methodology standards to ensure the development is performed appropriately. As a part of the development methodology, notification of new projects and major modifications are sent to the IOIA for inclusion in the Department's "Project" list.

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05-8. **FINDING** (Reporting requirements)

The Department of Public Health (Department) did not adhere to various reporting requirements established by State law. We noted the following:

- The Illinois Welfare and Rehabilitation Services Planning Act (20 ILCS 10/3 and 4) requires the Department to prepare and submit to the General Assembly a comprehensive plan providing for the best possible use of available resources for the development of the State's human resources and the provision of social services by the Department. The plan was to be submitted on or before April 1, 2005.

Department personnel stated the report due in April 2005 was not submitted since the Department did not provide direct services as it did prior to the formation of the Department of Human Services; therefore, the Department was unable to report on the provision of services not provided by the Department.

- The Nursing Home Care Act (210 ILCS 45/3-206.04) requires the Department to convene a task force to assess the feasibility and curriculum for a Certified Nurse Assistant Career Ladders Program. The task force shall report its findings and recommendations to the General Assembly on or before January 1, 2002. The Department has convened a task force, however the task force has not started the Career Ladders program. As a result, the task force has not submitted the report to the General Assembly as required.

Department personnel stated that the Certified Nurses Aide (CNA) Regulations Update committee determined that the CNA Training Program Regulations first needed to be updated (original regulations published in 1979) before the committee could begin the Career Ladders program. Once the review is complete, the Department will be ready to start the actual Career Ladders program.

- The Nursing Home Care Act (210 ILCS 45/3-804) requires the Department to report to the General Assembly by April 1 of each year upon the performance of its State long-term care facility licensure inspections, survey and evaluation duties and its actions in enforcement under this Act, including the number and needs of Department personnel engaged in such activities. The report due April 1, 2004 was filed in August 2004 and the report due April 1, 2005 was filed in August 2005.

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Department personnel stated that the submission of the Long Term Care Annual Report was late because information and data needed to complete the report was not finalized until the end of March, and compiling all the data and the required approvals takes two to three months to complete. The Department intends to introduce legislation to change the submission date of the report to July 1, to reflect a more realistic due date.

Failure to report to the General Assembly as required lessens governmental oversight and represents noncompliance with State law. (Finding Code No. 05-8, 03-2, 01-3, 99-4, 97-7)

RECOMMENDATION

We recommend the Department comply with the various reporting requirements or seek legislative remedy for statutory mandate provisions.

DEPARTMENT RESPONSE

The Department concurs with the finding and recommendation. Given that the responsibility for the Illinois Welfare and Rehabilitation Services Planning Act rests with the Department of Human Services, the Department will seek a legislative remedy to eliminate the statutory requirement for our Department.

The Certified Nurse Assistant Career Ladders Task Force has met and after reviewing the current regulations, it was determined that the regulations had to be updated before a determination could be made on if or how to progress to a Career Ladder for CNA's. The updating was a long and arduous process and was completed on August 5, 2005. The Task Force is currently meeting and working on the Career Ladder issue. The Annual Report to the General Assembly has included updates on the progress of this Task Force and is part of the Nursing Home Care Act Annual Report.

To provide accurate survey data for the Annual Report to the General Assembly, the program must wait until all pertinent survey statistics are available. This precludes the program from beginning to collate the data until May. For the past several years, the program has listed as a legislative initiative the revision of the reporting date from April 1 to July 1. The program will continue to pursue this change to the reporting requirement of the Nursing Home Care Act.

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05-9. **FINDING** (Youth Camp inspections not performed and licenses not issued)

The Department of Public Health (Department) did not perform camp inspections and did not issue license renewals upon expiration of previous licenses. We noted the following:

- Forty of 124 (32%) 2004 youth camps that operate yearly were issued renewal licenses 8 to 602 days after the expiration date of December 31, 2003.
- Twenty of 124 (16%) 2004 youth camps that operate during the summer months were issued renewal licenses after the youth camp had already started.
- Twenty-seven of 111 (24%) 2005 youth camps that operate yearly were issued renewal licenses 45 to 216 days after the expiration date of December 31, 2004.
- Three of 111 (3%) 2005 youth camps that operate during the summer months were issued renewal licenses after the youth camp had already started.
- The Department issued 4 licenses to youth camps where an inspection had not been performed.

The Youth Camp Act (Act) (210 ILCS 100/5) requires the Department to inspect the youth camp before issuing any license. All licenses shall expire on December 31 of the year of issue and shall be reissued annually upon application. The Act also indicates that it shall be unlawful for any person to establish, maintain, conduct or operate a youth camp within this State without obtaining a license by making application to the Department on a prescribed form. Such applications shall be made at least 45 days prior to the proposed opening date of the camp.

Department personnel stated that there were several issues that impacted the youth camp-licensing program. The data system being used to generate licenses was problematic due to the closure of the Data Entry Division, as a result, licenses were issued late. In cases where an inspector found violations, the camp was given a period of time to correct the violations which cause the licenses to be issued a significant amount of time after the expiration of the previous license. In some instances, camp owners failed to properly execute the renewals, pay the appropriate fees or accommodate the Department's inspection, resulting in the license being issued after the expiration date. In addition, Department personnel stated that due to staffing issues in the regional offices, annual inspections are sometimes out of sync with the licensure renewal resulting in licenses being issued before an inspection is performed.

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Failure to perform camp inspections could result in the endangerment of campers. In addition, not issuing licenses timely results in camps operating without a license and represents noncompliance with State law. (Finding Code No. 05-9, 03-4)

RECOMMENDATION

We recommend the Department perform inspections and issue licenses as required by the Youth Camp Act.

DEPARTMENT RESPONSE

The Department concurs with the finding. The renewal period is at the end of the calendar year when most camps are not in operation, e.g. summer camps. Consequently, some renewals are sent to the camp and no one is there or addresses may have changed. In the last few months Department staff have initiated a licensing data base that allows for immediate access to licensing information (versus an antiquated mainframe system). License renewal applications and licenses are now generated internally. The Department will stress the importance to the licensee of any address changes at the time of the inspection and in the license renewal letter for the next and following licensure years.

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05-10. **FINDING** (Noncompliance with the Illinois Migrant Labor Camp Law)

The Illinois Department of Public Health (Department) did not inspect migrant labor camps or issue corresponding licenses as required by the Illinois Migrant Labor Camp Law. We noted the following:

- 22 of 25 (88%) of migrant labor camps tested were not inspected 30 days prior to the date that the occupancy and use of the camp was to commence. Of the camps tested, inspections were made between 26 days prior to the proposed date of camp commencement and 82 days after the proposed date of camp commencement.
- 25 of 25 (100%) of migrant labor camps tested were not issued a license 15 days prior to the proposed date of camp commencement. Of the camps tested, licenses were issued between 5 days prior to the proposed date of camp commencement and 179 days after the proposed date of camp commencement.
- 2 of 25 (8%) migrant labor camps tested were issued licenses before being inspected by the Department.

The Illinois Migrant Labor Camp Law (210 ILCS 110/6) requires the Department, upon receipt of an application for license, to inspect the camp site and the facilities described in the application approximately 30 days prior to the date on which occupancy and use of the camp is to commence. If the camp is found to comply with the provisions of this Law, a license shall be issued at least 15 days prior to the date on which the occupancy and use of the camp is to commence. In addition, good business practices would require the Department to inspect the migrant labor camp prior to issuing a license.

Department personnel stated that the Department does not always know where the camps are to be located. Camps are established in various types of housing units and the Department has the ability to meet the mandatory inspection timelines only if it knows where the camps are to be located. However, often the housing is secured and the camp location is identified on the date before workers are utilized.

Failure to inspect migrant labor camps and issue licenses in a timely manner represents noncompliance with State law. (Finding Code No. 05-10, 03-5)

RECOMMENDATION

We recommend the Department comply with the requirements of the Illinois Migrant Labor Camp Law by inspecting and licensing migrant labor camps in accordance with State law.

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DEPARTMENT RESPONSE

The Department concurs with the finding. Migrant labor camps are based on available housing, crop growth and the location of the work. These change from year to year and the Department is usually notified less than 30 days of the date of the operation so an inspection cannot usually be performed and licenses issued as mandated. The date of operation is determined by the crop growth which depends on the weather conditions for that year. The operation of migrant camps have changed somewhat as they were when the law was initially written. For example, workers now stay in near-by hotels rather than on the work site.

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05-11. **FINDING** (Noncompliance with Innovations in Long-term Care Quality Grants Act)

The Department of Public Health (Department) did not comply with the Innovations in Long-term Care Quality Grants Act.

The Department did not establish a long-term care grant program. Further, the Department did not establish a commission (advisory board) to review applications for grants. Finally, the Department did not provide grants to long-term care facilities even though the Department received a \$1 million appropriation in fiscal year 2005 for this purpose.

The Innovations in Long-term Care Quality Grants Act (Act) (30 ILCS 772/5 and 20) requires the Department to establish a long-term grant program that demonstrates the best practices and innovation for long-term care service, delivery and housing. Further, the Act requires that any applications for grants be reviewed, ranked, and recommended by a commission of representatives chosen from recommendations made by organizations representing long-term care facilities in Illinois. Finally, the Act requires the Department provide grants to programs that demonstrate creativity in service provisions through the scope of their program or service.

Department personnel stated that the long-term care grant program has not been established nor have grants been provided to long-term care facilities due to difficulties in identifying candidates to serve on the advisory board to the long-term care grant program.

Failure to establish a long-term care grant program and provide grants to long-term care facilities is noncompliance with a State law and could lead to inadequate funding levels for long-term care facilities throughout the State. (Finding Code No. 05-11, 03-7)

RECOMMENDATION

We recommend the Department comply with the provisions of the Innovations in Long-term Care Quality Grants Act by establishing a long-term care grant program including an advisory board that provides grants to long-term care facilities.

DEPARTMENT RESPONSE

The Department concurs in the finding and recommendation. This program was not implemented because of a delay in getting the Commission/Advisory Board appointed. The Office of Health Care Regulation was notified on December 6, 2005 that the members of the Commission have now been approved. The Department is in the process of setting up the initial meeting of the Commission which will allow for the process of reviewing and approving grants under this Act.

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05-12. **FINDING** (Failure to file timely and accurate TA-2 Reports)

The Department of Public Health (Department) did not file 2 of 4 (50%) Travel Headquarter Reports (TA-2 Report) with the Legislative Audit Commission. Further, the other two TA-2 Reports that were filed listed incorrect headquarters for nine employees.

The State Finance Act (Act) (30 ILCS 105/12-3) requires State agencies to file Travel Headquarter Reports with the Legislative Audit Commission for all individuals where official headquarters are located other than where their official duties require them to spend the largest part of their working time. The reports shall be filed no later than July 15 for the period from January 1 through June 30 of that year and no later than January 15 for the period July 1 through December 31 of the preceding year.

Department personnel stated that the reports were not filed due to workload demands and that errors were due to miscommunication with the originating office.

Failure to file accurate Travel Headquarter Reports decreases the effectiveness of oversight controls. (Finding Code No. 05-12, 03-8)

RECOMMENDATION

We recommend the Department comply with the requirements of the State Finance Act by filing accurate Travel Headquarter Reports in a timely manner.

DEPARTMENT RESPONSE

The Department concurs in the finding and recommendation. As of this date all required TA-2 reports for this 2004-2005 audit period have been submitted to the Legislative Audit Commission. With respect to incorrect headquarters designations, the Department will work closely with the impacted offices to ensure proper listings are maintained.

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05-13. **FINDING** (Voucher processing weaknesses)

The Illinois Department of Public Health (Department) did not exercise adequate control over voucher processing. We noted the following weaknesses:

- Fifty-eight of 378 (15%) of vouchers tested, totaling \$2,158,696 were approved for payment from 1 to 193 days late. The Illinois Administrative Code (74 Ill. Admin. Code 900.70) requires an agency to review a bill and either deny the bill in whole or in part, ask for more information necessary to review the bill, or approve the bill in whole or in part, within 30 days after physical receipt of the bill.
- Thirteen of 378 (3%) of vouchers tested, totaling \$211,903 were approved for payment from 2 to 76 days late. All 13 were internal service fund vouchers. The Illinois Administrative Code (74 Ill. Admin. Code 1000.50) requires user agencies to process payments within 30 days after physical receipt of Internal Service Fund bills.
- Thirty-six of 418 (9%) vouchers tested, totaling \$4,131,400 were not signed and dated by the receiving officer. The Statewide Accounting Management System (SAMS) (Procedure 17.20.20) states each invoice-voucher, upon receipt of goods or services, must be signed by the receiving officer verifying goods or services meet the stated specifications.

Department personnel indicated that the delays in processing invoices were due to oversight, the Department's workload and lack of personnel. Further, Department personnel stated that generally a receiving signature is required only for invoices for goods.

Failure to promptly process vouchers may result in late payment of bills to vendors and result in excessive interest charges being levied against the Department. Failure to obtain receiving officer signatures can result in the State paying for goods or services not received. (Finding Code No. 05-13)

RECOMMENDATION

We recommend the Department comply with State regulations to ensure that all vouchers are processed and approved. The Department should further monitor voucher payments so that interest charges can be calculated and paid as required.

DEPARTMENT RESPONSE

The Department concurs with the finding and will continue to attempt to pay vouchers within the prompt payment guidelines. The Department is working with reduced staffing but is putting forth a great effort to eliminate this finding. Receiving signatures will also be required on all invoices and procedures have already been changed to reflect this.

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- 05-14. **FINDING** (Stroke Task Force not created timely and noncompliance with reporting requirements)

The Department of Public Health (Department) did not comply with requirements in regard to the Stroke Task Force as required by the Civil Administrative Code of Illinois.

The Department did not create the Stroke Task Force until June 2005, which was approximately three years after the State law became effective. In addition, the Department did not provide an annual report to the Governor and the General Assembly until October 2004.

The Civil Administrative Code of Illinois (Act) (20 ILCS 2310/2310-372) requires a Stroke Task Force to be created within the Department of Public Health effective July 19, 2002, in which the Department's Director shall serve as chairperson. In addition, the Act requires the Stroke Task Force to advise the Department concerning the awarding of grants to providers of emergency medical services and to hospitals for the purpose of improving care to stroke patients. Further, the Act requires the Stroke Task Force to submit an annual report to the Governor and the General Assembly by January 1 of each year, beginning in 2003.

Department personnel stated that the Stroke Task Force was not created until June 2005 due to there not being any State funding set aside for the purpose of the Stroke Task Force.

Failure to create a Stroke Task Force as required is noncompliance with State law. In addition, by not having a Stroke Task Force, the Department does not receive the proper advice in regard to improving stroke prevention and treatment efforts. (Finding Code No. 05-14)

RECOMMENDATION

We recommend the Department comply with the requirements set forth in the Civil Administrative Code of Illinois for the Stroke Task Force.

DEPARTMENT RESPONSE

The Department concurs with the audit finding. The Task Force has been constituted, there is full membership, and the Task Force has held at least three meetings to-date. The Department did secure a Federal award made available during fiscal year 2005 related to this program. This funding provides operational support which allows the Department to develop and implement a comprehensive statewide education program, identify signs and symptoms of stroke and actions to be taken and to recommend/revise/disseminate guidelines that pertain to this program area. The Task Force has been an active partner in the administration of this federal grant, even absent State funding for this program.

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05-15. **FINDING** (Field sanitation fines not being assessed)

The Department of Public Health (Department) did not assess fines to violators upon inspection of farm operations as required by the Field Sanitation Act.

During our testing we noted 4 of 8 (50%) field inspections performed during fiscal year 2004 and 2005 did not include the assessment of fines even though violations were noted on the field inspection forms.

The Department performed 17 inspections in fiscal year 2004 and 16 in fiscal year 2005, and no fines were assessed for either year.

The Field Sanitation Act (Act) (210 ILCS 105/12) requires the Department to perform random inspections on farm operations to ensure compliance with the Act. In addition, the Act requires the Department, upon receipt of a complaint or report of a violation, to inspect the farm operation that received the complaint. Any violators of this Act or of the Department's regulations shall be guilty of a petty offense and shall be fined no less than \$100.

Department personnel stated they did not assess penalties for violations during field sanitation inspections during FY04 and FY05. The Department's ability to assess fines for violations has served as an effective mechanism to ensure that the violations are immediately corrected, often while the Department's inspector is still on site. Thus, it has not been necessary to levy actual fines in this program although the Department would use that authority if the violation poses a severe health risk.

Failure to assess fines results in lost revenues to the State and is noncompliance with State law. (Finding Code No. 05-15, 03-3)

RECOMMENDATION

We recommend the Department comply with all aspects of the requirements of the Field Sanitation Act.

DEPARTMENT RESPONSE

The Department concurs with the finding. Generally, most violations of this Act can and are corrected during the on-site inspection. The Department's ability to assess fines for these violations has helped ensure that the violations are immediately corrected. The Department will use its authority if the violations pose a severe health risk to the workers and the community.

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
SCHEDULE OF FINDINGS (STATE COMPLIANCE)
For the Two Years Ended June 30, 2005

05-16. **FINDING** (Program Audit of the Illinois Health Facilities Planning Board)

The Illinois Health Facilities Planning Board (Planning Board) has implemented two and partially implemented or not implemented the remaining five recommendations contained in the OAG's *Program Audit of the Illinois Health Facilities Planning Board*, released in September 2001. The program audit examined 1) whether the Planning Board can demonstrate that the certificate of need process is successful in controlling health care costs, allowing public access to necessary health services, and guaranteeing the availability of quality health care to the general public, 2) whether the Planning Board is following its adopted rules and procedures, 3) whether the Planning Board is consistent in awarding and denying certificates of need and 4) whether the Planning Board's annual reports reflect a cost savings to the State. The program audit was conducted pursuant to Public Act 91-0782. The Illinois Health Facilities Planning Act (20 ILCS 3960/4), which created the Illinois Health Facilities Planning Board, is scheduled to be repealed on July 1, 2006.

The following discusses the status of the five recommendations from the 2001 program audit, which were not fully implemented during the prior audit period. In addition, the actions taken by the Planning Board to implement the other two recommendations are also described below.

- 1. The Health Facilities Planning Board should assure that when conditions are required of applicants that those conditions relate to the projects being considered and comply with the Health Facilities Planning Act.
(Program Audit Recommendation Number 1)**

Not Implemented: Management stated the Planning Board has addressed this issue during its current rulemaking. The Planning Board is currently conducting a comprehensive review of all its rules, criteria and standards. The objective is to complete all draft rules by the end of 2006. In its first set of major revisions, rules amendments to Part 1130, the issue of conditional permits is addressed and parameters on the limits of those conditions established.

- 2. The Planning Board and the staff at the Department of Public Health should take every effort to analyze their effectiveness and to make changes to improve effectiveness. This may include working with consumers, health care payors, health research groups, health care providers, health care associations, and members of the General Assembly to be certain that the Illinois health planning process serves the needs of the people of Illinois.
(Program Audit Recommendation Number 2)**

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
SCHEDULE OF FINDINGS (STATE COMPLIANCE)
For the Two Years Ended June 30, 2005

Implemented: The Department of Public Health and the Planning Board have taken efforts to improve effectiveness including reports that have been prepared comparing the Illinois' program to others. The Board has also been through major rewrites of their rules and procedures.

- 3. State agency staff at the Department of Public Health should assure that evaluation criteria are applied consistently in the projects that they review and the State Agency Reports that they prepare.
(Program Audit Recommendation Number 3)**

Partially Implemented: Planning Board management stated it has engaged in extensive rule changes. The current proposal encompasses how applications will be processed. Future rulemakings will include substantive changes to the Planning Board's rules on the standards and criteria utilized when reviewing an application. A stated objective of this revision is to clarify the criteria language. Changes in this area of the rules will improve both the Planning Board and the Department of Public Health's ability to be consistent when applying standards and criteria to various applications.

- 4. The Health Facilities Planning Board should examine their review criteria and make adjustments to the existing criteria or eliminate duplicative criteria to minimize the domino effect.
(Program Audit Recommendation Number 4)**

Partially Implemented: The Planning Board is currently in the process of rewriting its rules and regulations. Planning Board management stated a significant portion of the comprehensive review and revision of its rulemaking is being devoted to re-examining the Planning Board's standards and criteria rules which are applied in the evaluation of applications with the intent to eliminate or substantially minimize the potential "domino effect" that may currently occur in the review of applications.

- 5. The Health Facilities Planning Board should assure that deferrals are used consistently. The Board should assure that the administrative rules are followed and that applicants are given consistent and fair consideration.
(Program Audit Recommendation Number 5)**

Implemented: Requirements related to deferrals have changed considerably since the program audit was complete. Applicants may now receive multiple deferrals.

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
SCHEDULE OF FINDINGS (STATE COMPLIANCE)
For the Two Years Ended June 30, 2005

- 6. The Board should assure that all applications are treated consistently. This may require reviewing how similar projects were treated and may require comparing similar projects to choose the best one.
(Program Audit Recommendation Number 6)**

Not Implemented: The Planning Board is in the process of evaluating all of its rules and relevant procedures. Planning Board management stated one area under consideration is the process of comparative review (“batching”). Management stated that a batching process would allow providers to submit similar applications. These applications would be evaluated against the established standards and criteria as well as against other providers. This process would then allow the Planning Board to conduct a comparative review of several proposals and select the application which best meets the needs of the planning area while simultaneously meeting the Planning Board’s mandate of improving access to quality health care services and facilities.

- 7. The Board should consider issuing a statement of findings for why a project is approved or denied. This should be done for all projects approved as well as projects receiving an intent-to-deny, an initial denial, and a final denial. For denials, this statement should not just reiterate the criteria not met in the State Agency Report since most projects are approved without meeting all criteria.
(Program Audit Recommendation Number 7)**

Not Implemented: Planning Board management stated although there is not a formal process currently, members are stating for the record why they believe an application does (or does not) have merit and why it should (or should not) be approved. These statements are being transcribed at the meetings. Planning Board management stated as part of its administrative rule revisions, the Planning Board is considering establishing a formal “Statement of Findings” process. (Finding Code No. 05-16)

RECOMMENDATION

The Health Facilities Planning Board should continue its efforts to implement recommendations contained in the 2001 Office of the Auditor General’s program audit. Specifically, the Planning Board should review the recommendations noted and continue its efforts to revise its rules, criteria and standards in its effort to ensure each recommendation is addressed and fully implemented.

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
SCHEDULE OF FINDINGS (STATE COMPLIANCE)
For the Two Years Ended June 30, 2005

DEPARTMENT RESPONSE

The Department concurs with the prior recommendations and the current status of those recommendations. Regarding Program Audit Recommendation Number 1, the State Board has addressed this issue during its current rulemaking. Contained in its proposed amendments to Part 1130 rules, parameters are established for “conditional permits.” These rules have concluded the 1st Notice process and will be submitted to the Joint Committee on Administrative Rules (JCAR) for 2nd Notice by the end of April 2006. Regarding Program Audit Recommendation Number 6, the current administrative rules do not allow for a comparative review of similar applications and do, in fact, state that each application must be considered on its own merit. Under specific circumstances, a comparative review or “batching” process is permissible and is being considered under the State Board’s rules initiative.

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
PRIOR FINDINGS NOT REPEATED (STATE COMPLIANCE)
For the Two Years Ended June 30, 2005

05-17. **FINDING** (Internal audit requirements)

During the prior examination, the Department of Public Health's Division of Internal Audit did not comply with provisions of the Fiscal Control and Internal Auditing Act. The Division of Internal Audit did not perform all planned audits (including major system audits).

During the current examination, internal audit requirements became the responsibility of the Illinois Office of Internal Audits. As a result, the Department no longer has the responsibility to plan major systems of internal accounting and administrative control or conduct those audits. However, the Department still has the responsibility to contact the Illinois Office of Internal Audit if the Department develops or modifies any major systems. We noted during our examination that the Department failed to have a major computer system independently reviewed. See finding 05-7 for more details. (Finding Code No. 03-1, 01-1, 99-1, 97-1, 95-1, 93-3, 91-6, 89-21, 87-24/27)

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
COMPLIANCE EXAMINATION
For the Two Years Ended June 30, 2005

SUPPLEMENTARY INFORMATION FOR STATE COMPLIANCE PURPOSES

SUMMARY

Supplementary Information for State Compliance Purposes presented in this section of the report includes the following:

- Fiscal Schedules and Analysis:
 - Schedule of Expenditures of Federal Awards
 - Notes to the Schedule of Expenditures of Federal Awards
 - Schedule of Appropriations, Expenditures and Lapsed Balances
 - Comparative Schedule of Net Appropriations, Expenditures and Lapsed Balances
 - Schedule of Efficiency Initiative Payments
 - Comparative Schedule of Receipts, Disbursements and Fund Balance (Cash Basis) – Locally-Held Fund
 - Schedule of Changes in State Property
 - Comparative Schedule of Cash Receipts and Reconciliation Schedule of Cash Receipts to Deposits Remitted to the State Comptroller
 - Analysis of Significant Variations in Expenditures
 - Analysis of Significant Variations in Receipts
 - Analysis of Significant Lapse Period Spending
 - Analysis of Accounts Receivable
 - Schedule of Indirect Cost Reimbursements

- Analysis of Operations:
 - Agency Functions and Planning Program
 - Average Number of Employees
 - Emergency Purchases
 - Service Efforts and Accomplishments (Not Examined)

The auditors' report that covers the Supplementary Information for State Compliance Purposes presented in the Compliance Report Section states the auditors have applied certain limited procedures as prescribed by the Audit Guide as adopted by the Auditor General, except for information on the Service Efforts and Accomplishments on which they did not perform any procedures. However, the auditors do not express an opinion on the supplementary information.

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
For the Year Ended June 30, 2005
(expressed in thousands)

<u>Federal Grantor/Pass-Through Grantor/Program Title</u>	<u>Federal CFDA Number</u>	<u>Federal Expenditures</u>	<u>Amount Provided to Subrecipients</u>
U.S. Department of Agriculture			
<u>Passed through programs from:</u>			
Illinois Department of Human Services Special Supplemental Nutrition Program for Women, Infants and Children	10.557	\$ (2)	\$ 0
Illinois State Board of Education Summer Food Service Program for Children	10.559	41	24
Total U.S. Department of Agriculture		<u>39</u>	<u>24</u>
U.S. Department of Housing and Urban Development			
Housing Opportunities for Persons with AIDS	14.241	1,329	1,096
Lead-Based Paint Hazard Control in Privately-Owned Housing	14.900	794	716
Total U.S. Department of Housing and Urban Development		<u>2,123</u>	<u>1,812</u>
U.S. Department of Labor			
Compensation and Working Conditions	17.005	220	0
Total U.S. Department of Labor		<u>220</u>	<u>0</u>
U.S. Environmental Protection Agency			
Water Quality Cooperative Agreements	66.463	90	0
Beach Monitoring and Notification Program Implementation Grants	66.472	57	12
Surveys, Studies, Investigations and Special Purpose Grants	66.606	1	0
Consolidated Pesticide Enforcement Cooperative Agreements	66.700	309	0
TSCA Title IV State Lead Grants Certification of Lead-Based Paint Professionals	66.707	394	0
<u>Passed through programs from:</u>			
Illinois Environmental Protection Agency Capitalization Grants for Drinking Water State Revolving Funds	66.468	(3)	0
State Grants to Reimburse Operators of Small Water Systems for Training and Certification Costs	66.471	58	19
Performance Partnership Grants	66.605	752	118
Total U.S. Environmental Protection Agency		<u>1,658</u>	<u>149</u>

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
For the Year Ended June 30, 2005
(expressed in thousands)

<u>Federal Grantor/Pass-Through Grantor/Program Title</u>	<u>Federal CFDA Number</u>	<u>Federal Expenditures</u>	<u>Amount Provided to Subrecipients</u>
U.S. Department of Education			
Special Education - Grants for Infants and Families with Disabilities	84.181	19	0
Total U.S. Department of Education		<u>19</u>	<u>0</u>
U.S. Department of Health and Human Services			
Public Health and Social Services Emergency Fund	93.003	14,785	12,019
Alzheimer's Disease Demonstration Grants to States	93.051	(14)	0
Food and Drug Administration - Research	93.103	2	0
Maternal and Child Health Federal Consolidated Programs	93.110	90	0
Project Grants and Cooperative Agreements for Tuberculosis Control Programs	93.116	1,178	84
Primary Care Services Resource Coordination and Development	93.130	258	149
Injury Prevention and Control Research and State and Community Based Programs	93.136	2,624	2,554
Grants to States for Loan Repayment Program	93.165	225	167
Childhood Lead Poisoning Prevention Projects - State and Local Childhood Lead Poisoning Prevention and Surveillance of Blood Lead Levels in Children	93.197	848	171
State Capacity Building	93.240	429	0
State Rural Hospital Flexibility Program	93.241	665	665
Rural Access to Emergency Devices Grant	93.259	241	241
Immunization Grants	93.268	29,105	1,231
Centers for Disease Control and Prevention - Investigations and Technical Assistance	93.283	41,384	19,378
Small Rural Hospital Improvement Grant Program	93.301	494	494
Refugee and Entrant Assistance - State Administered Programs	93.566	16	0
Refugee and Entrant Assistance - Discretionary Grants	93.576	128	70
State Survey and Certification of Health Care Providers and Suppliers	93.777	11,726	705
Centers for Medicare and Medicaid Services Research, Demonstrations and Evaluations	93.779	2	0

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
For the Year Ended June 30, 2005
(expressed in thousands)

<u>Federal Grantor/Pass-Through Grantor/Program Title</u>	<u>Federal CFDA Number</u>	<u>Federal Expenditures</u>	<u>Amount Provided to Subrecipients</u>
Grants to States for Operation of Offices of Rural Health	93.913	76	65
HIV Care Formula Grants	93.917	37,804	6,415
Epidemiologic Research Studies of Acquired Immunodeficiency Syndrome (AIDS) and Human Immunodeficiency Virus (HIV) Infection in Selected Population Groups	93.943	4,399	2,027
Human Immunodeficiency Virus (HIV) / Acquired Immunodeficiency Virus Syndrome (AIDS) Surveillance	93.944	944	64
Assistance Programs for Chronic Disease Prevention and Control	93.945	1,319	663
Trauma Care Systems Planning and Development	93.952	34	0
Preventive Health Services - Sexually Transmitted Diseases Control Grants	93.977	2,399	621
Preventive Health and Health Services Block Grant	93.991	3,060	722
Maternal and Child Health Services Block Grant to the States	93.994	2,813	1,997
Food Inspections	93.XXX	158	0
Social Security Enumeration at Birth	93.XXX	374	0
Adult Blood Lead Epidemiology & Surveillance (ABLES)	93.XXX	17	0
Women Health Issues	93.XXX	1	0
Fruit Pesticide	93.XXX	2	0
Partnership Funds	93.XXX	9	0
<u>Passed through programs from:</u>			
Illinois Department of Human Services			
Family Planning Services	93.217	150	0
Refugee and Entrant Assistance - State Administered Programs	93.566	901	603
Cooperative Agreements for State-Based Diabetes Control Programs and Evaluation of Surveillance Systems	93.988	10	0
Block Grants for Prevention and Treatment of Substance Abuse	93.959	83	0
Total U.S. Department of Health and Human Services		158,739	51,105

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
For the Year Ended June 30, 2005
(expressed in thousands)

<u>Federal Grantor/Pass-Through Grantor/Program Title</u>	<u>Federal CFDA Number</u>	<u>Federal Expenditures</u>	<u>Amount Provided to Subrecipients</u>
U.S. Department of Homeland Security			
Chemical Stockpile Emergency Preparedness Program	97.040	1	0
<u>Passed through programs from:</u>			
Illinois Emergency Management Agency			
State Domestic Preparedness Equipment Support Program	97.004	473	0
State and Local Homeland Security Exercise Support	97.006	40	0
Chemical Stockpile Emergency Preparedness Program	97.040	149	63
Total U.S Department of Homeland Security		<u>663</u>	<u>63</u>
TOTAL EXPENDITURES OF FEDERAL AWARDS		<u>\$ 163,461</u>	<u>\$ 53,153</u>

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS

For the Year Ended June 30, 2004
(expressed in thousands)

<u>Federal Grantor/Pass-Through Grantor/Program Title</u>	<u>Federal CFDA Number</u>	<u>Federal Expenditures</u>	<u>Amount Provided to Subrecipients</u>
U.S. Department of Agriculture			
<u>Passed through programs from:</u>			
Illinois Department of Human Services Special Supplemental Nutrition Program for Women, Infants and Children	10.557	\$ 29	\$ 0
Illinois State Board of Education Summer Food Service Program for Children	10.559	28	23
Total U.S. Department of Agriculture		<u>57</u>	<u>23</u>
U.S. Department of Commerce			
Census Bureau Data Support	11.XXX	1	0
Total U.S. Department of Commerce		<u>1</u>	<u>0</u>
U.S. Department of Housing and Urban Development			
Housing Opportunities for Persons with AIDS	14.241	1,041	731
Lead-Based Paint Hazard Control in Privately-Owned Housing	14.900	1,301	874
Total U.S. Department of Housing and Urban Development		<u>2,342</u>	<u>1,605</u>
U.S. Department of Labor			
Compensation and Working Conditions	17.005	144	0
Total U.S. Department of Labor		<u>144</u>	<u>0</u>
U.S. Environmental Protection Agency			
Water Quality Cooperative Agreements	66.463	106	0
Beach Monitoring and Notification Program Implementation Grants	66.472	154	101
Surveys, Studies, Investigations and Special Purpose Grants	66.606	1	0
Consolidated Pesticide Enforcement Cooperative Agreements	66.700	286	0
TSCA Title IV State Lead Grants Certification of Lead-Based Paint Professionals	66.707	368	0
<u>Passed through programs from:</u>			
Illinois Environmental Protection Agency Capitalization Grants for Drinking Water State Revolving Funds	66.468	7	0

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
For the Year Ended June 30, 2004
(expressed in thousands)

<u>Federal Grantor/Pass-Through Grantor/Program Title</u>	<u>Federal CFDA Number</u>	<u>Federal Expenditures</u>	<u>Amount Provided to Subrecipients</u>
State Grants to Reimburse Operators of Small Water Systems for Training and Certification Costs	66.471	138	35
Performance Partnership Grants	66.605	629	184
Total U.S. Environmental Protection Agency		<u>1,689</u>	<u>320</u>
U.S. Department of Health and Human Services			
Public Health and Social Services Emergency Fund	93.003	14,430	11,242
Alzheimer's Disease Demonstration Grants to States	93.051	341	0
Food and Drug Administration - Research	93.103	43	6
Project Grants and Cooperative Agreements for Tuberculosis Control Programs	93.116	1,221	250
Primary Care Services Resource Coordination and Development	93.130	202	147
Injury Prevention and Control Research and State and Community Based Programs	93.136	2,320	1,341
Grants to States for Loan Repayment Program	93.165	192	192
Childhood Lead Poisoning Prevention Projects - State and Local Childhood Lead Poisoning Prevention and Surveillance of Blood Lead Levels in Children	93.197	880	867
State Capacity Building	93.240	540	0
State Rural Hospital Flexibility Program	93.241	830	823
Rural Access to Emergency Devices Grant	93.259	244	239
Immunization Grants	93.268	24,829	1,310
Centers for Disease Control and Prevention - Investigations and Technical Assistance	93.283	38,126	21,694
Small Rural Hospital Improvement Grant Program	93.301	418	418
Refugee and Entrant Assistance - State Administered Programs	93.566	16	0
Refugee and Entrant Assistance - Discretionary Grants	93.576	123	105
State Survey and Certification of Health Care Providers and Suppliers	93.777	11,198	368
Medical Library Assistance	93.879	18	0
Grants to States for Operation of Offices of Rural Health	93.913	118	35
HIV Care Formula Grants	93.917	32,020	27,030
Epidemiologic Research Studies of Acquired Immunodeficiency Syndrome (AIDS) and Human Immunodeficiency Virus (HIV) Infection in Selected Population Groups	93.943	4,878	2,867

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
For the Year Ended June 30, 2004
(expressed in thousands)

<u>Federal Grantor/Pass-Through Grantor/Program Title</u>	<u>Federal CFDA Number</u>	<u>Federal Expenditures</u>	<u>Amount Provided to Subrecipients</u>
Human Immunodeficiency Virus (HIV) / Acquired Immunodeficiency Virus Syndrome (AIDS) Surveillance Assistance Programs for Chronic Disease Prevention and Control	93.944	932	62
Trauma Care Systems Planning and Development	93.945	656	0
Preventive Health Services - Sexually Transmitted Diseases Control Grants	93.952	40	0
Preventive Health and Health Services Block Grant	93.977	1,949	681
Maternal and Child Health Services Block Grant to the States	93.991	2,463	307
Food Inspections	93.994	764	302
Social Security Enumeration at Birth	93.XXX	129	0
Adult Blood Lead Epidemiology & Surveillance (ABLES)	93.XXX	378	0
<u>Passed through programs from:</u>			
Illinois Department of Human Services			
Family Planning Services	93.XXX	6	0
Refugee and Entrant Assistance - State Administered Programs	93.217	150	0
Healthy Start Initiative	93.566	722	0
Cooperative Agreements for State-Based Diabetes Control Programs and Evaluation of Surveillance Systems	93.926	1	0
Total U.S. Department of Health and Human Services		<u>141,193</u>	<u>70,286</u>
U.S. Department of Homeland Security			
<u>Passed through programs from:</u>			
Illinois Emergency Management Agency			
State and Local Homeland Security Exercise Support	97.006	460	0
Chemical Stockpile Emergency Preparedness Program	97.040	142	32
Total U.S Department of Homeland Security		<u>602</u>	<u>32</u>
TOTAL EXPENDITURES OF FEDERAL AWARDS		<u>\$ 146,028</u>	<u>\$ 72,266</u>

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
NOTES TO THE SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
For the Two Years Ended June 30, 2005

1. ORGANIZATION AND GRANT ADMINISTRATION

The Department of Public Health (Department) is a part of the executive branch of government of the State of Illinois operating under the authority of and review by the Illinois General Assembly. The Department operates under a budget approved by the General Assembly in which resources of the State's General Revenue Fund are appropriated for the use of the Department. Activities of the Department are subject to the authority of the Office of the Governor, the State's chief executive officer, and other departments of the executive and legislative branches of government (such as the Department of Central Management Services and the State Comptroller's Office) as defined by the General Assembly.

The responsibility of the Department is promotion and protection of health and the prevention of disease among the residents of Illinois through the application of public health practices. Programs administered by the Department are designed to prevent illness and injury, interrupt the transmission of disease, identify and eliminate sources of disease and hazards to the health of the public, provide a more healthful environment, enhance the quality of health-care facilities, and increase public awareness of individual actions which can result in a longer and healthier life. The Department is organized into nine offices (Director, Health Promotion, Health Protection, Health Care Regulation, Preparedness and Response, Women's Health, Policy Planning & Statistics, Finance & Administration and Human Resources) to carry out its responsibilities and administer the Department's services. A significant portion of the services are provided by subrecipient agencies.

The Department receives federal awards in the capacity of a primary recipient and as a pass-through entity.

Primary Recipient

The Department has been designated as the primary (or direct) recipient for a majority of federal programs for which it receives federal awards. The primary responsibilities of the Department as a primary recipient are to ensure that all planning, public participation, reporting and auditing requirements associated with the federal awards programs are met and that all available federal awards are received and expended in accordance with the requirements of the related grant or contract.

Pass-through

The Department is a pass-through entity of certain federal awards for which the Illinois Environmental Protection Agency, Illinois Emergency Management Agency, Illinois Department of Human Services and Illinois State Board of Education are the primary recipients.

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
NOTES TO THE SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
For the Two Years Ended June 30, 2005

2. SIGNIFICANT ACCOUNTING POLICIES

A. Basis of Presentation

The Schedule of Expenditures of Federal Awards presents the activity of all federal programs in which expenditures were made and/or claimed by the Department as a primary recipient or as a pass-through entity for the years ended June 30, 2004 and June 30, 2005.

B. Basis of Accounting

The Schedule of Expenditures of Federal Awards has been prepared on the modified accrual basis of accounting.

C. Program or Award

Program or award amounts are those which have been approved for program expenditures only in the period either by the applicable federal grantor department or by the State's designated primary recipient. This includes awards remaining from prior periods that are available and awards approved during the period.

D. Revenue Recognition

Revenue is recognized when it is earned. Cash balances at year end reflect federal financial awards received but unexpended or the excess of expenditures over cash receipts (overdrafts).

E. Expenditures

Expenditures are recognized when goods or services have been received and payment is due during the year or soon thereafter.

3. DESCRIPTION OF GRANT PROGRAMS

A brief description of Federal Programs with expenditures over \$1 million follows:

A. U.S. Department of Housing and Urban Development

- Housing Opportunities for Persons with AIDS - CFDA #14.241

To provide States and localities with the resources and incentives to devise long-term comprehensive strategies for meeting the housing needs of persons with AIDS or related diseases and their families.

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
NOTES TO THE SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
For the Two Years Ended June 30, 2005

- Lead-Based Paint Hazard Control in Privately-Owned Housing - CFDA #14.900

Lead-Based Paint Hazard Control grants assist State, Tribal, and local governments to identify and control lead-based paint hazards in privately-owned housing that is owned by or rented to low- or very-low income families.

B. U.S. Department of Health and Human Services

- Public Health and Social Services Emergency Fund - CFDA #93.003

To prepare our nation's public health system and hospitals for future emergencies, for an emergency reserve of medical supplies for use in a variety of possible mass casualty events, and to accelerate research into new treatments and diagnostic tools to cope with possible bioterrorism incident.

- Project Grants and Cooperative Agreements for Tuberculosis Control Programs - CFDA #93.116

To assist State and local health agencies in carrying out tuberculosis control activities designed to prevent transmission of infection and disease.

- Injury Prevention and Control Research and State and Community Based Programs - CFDA #93.136

RESEARCH GRANTS: (1) To support injury control research on priority issues; (2) to integrate aspects of engineering, public health, behavioral sciences, medicine, and other disciplines in order to prevent and control injuries more effectively; (3) to rigorously apply and evaluate current and new interventions, methods, and strategies that focus on the prevention and control of injuries; (4) to stimulate and support Injury Control Research Centers (ICRC) in academic institutions which will develop a comprehensive and integrated approach to injury control research and training; and (5) to bring the knowledge and expertise of ICRC's to bear on the development of effective public health programs for injury control. STATE AND COMMUNITY PROGRAM GRANTS: (1) To develop and evaluate new methods or to evaluate existing methods and techniques used in injury surveillance by public health agencies; and (2) to develop, expand, or improve injury control programs to reduce morbidity, mortality, severity, disability, and cost from injuries.

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
NOTES TO THE SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
For the Two Years Ended June 30, 2005

- Immunization Grants - CFDA #93.268

To assist States and communities in establishing and maintaining preventive health service programs to immunize individuals against vaccine-preventable diseases (including measles, rubella, poliomyelitis, diphtheria, pertussis, tetanus, hepatitis B, hepatitis A, varicella, mumps, haemophilus influenza type b, influenza, and pneumococcal pneumonia).

- Centers for Disease Control and Prevention - Investigations and Technical Assistance - CFDA #93.283

To assist State and local health authorities and other health related organizations in controlling communicable diseases, chronic diseases, and disorders, and other preventable health conditions. Investigations and evaluation of all methods of controlling or preventing disease and disability are carried out by providing epidemic aid, surveillance, technical assistance, consultation, and program support; and by providing leadership and coordination of joint national, State, and local efforts.

- State Survey and Certification of Health Care Providers and Suppliers - CFDA #93.777

To provide financial assistance to any State which is able and willing to determine through its State health agency or other appropriate State agency that providers and suppliers of health care services are in compliance with Federal regulatory health and safety standards and conditions of participation.

- HIV Care Formula Grants - CFDA #93.917

To enable States to improve the quality, availability, and organization of health care and support services for individuals and families with Human Immunodeficiency Virus (HIV) disease.

- Epidemiologic Research Studies of Acquired Immunodeficiency Syndrome (AIDS) and Human Immunodeficiency Virus (HIV) Infection in Selected Population Groups - CFDA #93.943

To support research of important HIV-related epidemiologic issues concerning risks of transmission, the natural history and transmission of the disease in certain populations and development and evaluation of behavioral recommendations for reducing AIDS and HIV infection.

STATE OF ILLINOIS
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NOTES TO THE SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
For the Two Years Ended June 30, 2005

- Assistance Programs for Chronic Disease Prevention and Control - CFDA #93.945

To work with State health agencies and other public and private nonprofit organizations in planning, developing, integrating, coordinating, or evaluating programs to prevent and control chronic diseases such as epilepsy and lupus; assist in monitoring the major behavioral risks associated with the 10 leading causes of premature death and disability in the United States including cardiovascular diseases and arthritis; and establish new chronic disease prevention programs.

- Preventive Health Services - Sexually Transmitted Diseases Control Grants - CFDA #93.977

To reduce morbidity and mortality by preventing cases and complications of sexually transmitted diseases (STD). Project grants under Section 318c awarded to State and local health departments emphasize the development and implementation of nationally uniform prevention and control programs which focus on disease intervention activities designed to reduce the incidence of these diseases, with applied research, demonstration, and public and professional education activities supporting these basic program activities authorized under Section 318b of the Public Health Service Act.

- Preventive Health and Health Services Block Grant - CFDA #93.991

To provide States with the resources to improve the health status of the population of each grantee through: (A) activities leading to the accomplishment of the year 2000/2010 objectives for the nation; (B) rodent control and community-school fluoridation activities; (C) specified emergency medical services excluding most equipment purchases; (D) services for sex offense victims including prevention activities; and (E) for related administration, education, monitoring and evaluation activities.

- Maternal and Child Health Services Block Grant to the States - CFDA #93.994

To enable States to maintain and strengthen their leadership in planning, promoting, coordinating, and evaluating health care for pregnant women, mothers, infants, and children and children with special health care needs in providing health services for mothers and children who do not have access to adequate health care.

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
NOTES TO THE SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
For the Two Years Ended June 30, 2005

4. PASS-THROUGH AND SUBRECIPIENT AWARDS

The Department is a pass-through entity for certain federal awards from other State of Illinois agencies noted above. The Department provided federal awards to subrecipients as noted in the Schedule of Expenditures of Federal Awards.

5. INTERAGENCY AGREEMENTS

The Department participated in several interagency agreements with the Department of Human Services. The agreements required the Department of Public Health to perform duties and incur the associated costs for the federal Refugee and Entrant Assistance Program administered by the Department of Human Services (CFDA #93.566). The Department of Public Health prepared and submitted quarterly reports to the Department of Human Services, which detailed costs incurred for the Refugee Assistance Program. The Department of Human Services obtained reimbursements from the United States Department of Health and Human Services for these costs. According to the Department of Public Health, the federal share of reimbursements totaling \$782,000 was reported for fiscal year 2004 and the federal share of reimbursements totaling \$975,000 was reported for fiscal year 2005.

6. NONCASH AWARDS

The Department did receive non-cash awards in fiscal year 2004 of \$20,440,000 and in fiscal year 2005 of \$24,575,000 from the U.S. Department of Health and Human Services.

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
SCHEDULE OF APPROPRIATIONS, EXPENDITURES AND LAPSED BALANCES
For The Fiscal Year Ended June 30, 2005

P.A. 93-0681, 93-0842, 93-1070 FISCAL YEAR 2005	Fund Number	Appropriations (Net of Transfers)	Expenditures Through June 30	Lapse Period Expenditures July 1 to August 31	Total Expenditures 14 Months Ended August 31	Balances Lapsed August 31
General Revenue Fund	001	\$ 122,787,293	\$ 105,190,535	\$ 13,441,504	\$ 118,632,039	\$ 4,155,254
Food and Drug Safety Fund	014	1,727,600	852,428	194,082	1,046,510	681,090
Penny Severns Breast and Cervical Cancer Fund	015	600,000	322,316	176,820	499,136	100,864
Rural/Downstate Health Access Fund	048	525,000	0	0	0	525,000
Alzheimer's Disease Research Fund	060	200,000	151,562	40,923	192,485	7,515
Lou Gherig's Disease Research Fund	061	100,000	98,000	0	98,000	2,000
Public Health Services Fund	063	157,850,871	112,564,890	17,261,613	129,826,503	28,024,368
Community Health Center Fund	113	1,185,600	142,193	2,033	144,226	1,041,374
Facility Licensing Fund	118	659,651	354,539	7,331	361,870	297,781
Illinois School Asbestos Abatement Fund	175	952,500	633,503	72,852	706,355	246,145
Illinois Health Facilities Planning Fund	238	1,809,056	1,077,169	87,537	1,164,706	644,350
Emergency Public Health Fund	240	3,413,600	2,119,360	2,876	2,122,236	1,291,364
Public Health Water Permit Fund	256	200,000	34,742	11,550	46,292	153,708
Nurse Dedicated and Professional Fund	258	750,000	595,125	0	595,125	154,875
Long Term Care Monitor/Receiver Fund	285	607,800	468,571	127,051	595,622	12,178
Used Tire Management Fund	294	500,000	398,892	17,783	416,675	83,325
Public Health Services Revolving Fund	340	3,078,000	801,454	204,800	1,006,254	2,071,746
Lead Poisoning, Screening, Prevention and Abatement Fund	360	4,918,540	2,297,621	359,089	2,656,710	2,261,830
Tanning Facility Permit Fund	370	500,000	244,589	68,711	313,300	186,700
Innovations in Long Term Care Quality Demonstration Grants Fund	371	1,000,000	0	0	0	1,000,000
Plumbing Licensure and Program Fund	372	1,309,582	918,862	111,218	1,030,080	279,502
End Stage Renal Disease Facility Licensing Fund	381	385,000	0	0	0	385,000
Regulatory Evaluation and Basic Enforcement Fund	388	150,000	25,734	4,467	30,201	119,799
Trauma Center Fund	397	6,000,000	65,160	4,983,979	5,049,139	950,861

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
SCHEDULE OF APPROPRIATIONS, EXPENDITURES AND LAPSED BALANCES
For The Fiscal Year Ended June 30, 2005

P.A. 93-0681, 93-0842, 93-1070 FISCAL YEAR 2005	Fund Number	Appropriations (Net of Transfers)	Expenditures Through June 30	Lapse Period Expenditures July 1 to August 31	Total Expenditures 14 Months Ended August 31	Balances Lapsed August 31
EMS Assistance Fund	398	300,000	335	21,930	22,265	277,735
Federal Civil Preparedness Administrative Fund	497	2,100,000	345,064	93,382	438,446	1,661,554
Health Facility Plan Review Fund	524	2,218,559	1,541,190	103,884	1,645,074	573,485
Pesticide Control Fund	576	200,000	183,139	10,955	194,094	5,906
Prostate Cancer Research Fund	626	500,000	47,523	133,480	181,003	318,997
Death Certificate Surcharge Fund	635	3,082,000	360,929	23,012	383,941	2,698,059
Leukemia Treatment and Education Fund	691	100,000	64,300	0	64,300	35,700
Assisted Living and Shared Housing Regulatory Fund	702	100,000	97,010	855	97,865	2,135
Asthma and Lung Research Fund	713	100,000	72,882	0	72,882	27,118
Spinal Cord Injury Paralysis Cure Research Fund	714	100,000	0	98,000	98,000	2,000
Tobacco Settlement Recovery Fund	733	15,900,000	7,398,448	3,196,339	10,594,787	5,305,213
Public Health Federal Projects Fund	838	812,000	158,112	32,692	190,804	621,196
Maternal and Child Health Services Block Fund	872	3,541,800	2,102,278	920,205	3,022,483	519,317
Preventive Health and Health Services Block Fund	873	4,388,500	1,943,053	894,897	2,837,950	1,550,550
Public Health Special State Projects Fund	896	3,625,000	1,626,017	536,307	2,162,324	1,462,676
Metabolic Screening and Treatment Fund	920	8,915,200	6,668,835	1,077,990	7,746,825	1,168,375
Hearing Instrument Dispenser Examining and Disciplinary Fund	938	104,500	62,294	3,055	65,349	39,151
Illinois State Podiatric Disciplinary Fund	954	65,000	27,062	0	27,062	37,938
Total Fiscal Year 2005		<u>\$ 357,362,652</u>	<u>\$ 252,055,716</u>	<u>\$ 44,323,202</u>	<u>\$ 296,378,918</u>	<u>\$ 60,983,734</u>

Note: Appropriations, expenditures, and lapsed balances were obtained from Agency records and have been reconciled to records of the State Comptroller.

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
SCHEDULE OF APPROPRIATIONS, EXPENDITURES AND LAPSED BALANCES
For The Fiscal Year Ended June 30, 2004

P.A. 93-90, 93-92, 93-635 FISCAL YEAR 2004	Fund Number	Appropriations (Net of Transfers)	Expenditures Through June 30	Lapse Period Expenditures July 1 to August 31	Total Expenditures 14 Months Ended August 31	Balances Lapsed August 31
General Revenue Fund	001	\$ 119,486,789	\$ 97,401,278	\$ 12,152,362	\$ 109,553,640	\$ 9,933,149
Food and Drug Safety Fund	014	1,800,000	963,222	199,364	1,162,586	637,414
Penny Severns Breast and Cervical Cancer Fund	015	600,000	392,552	183,367	575,919	24,081
Rural/Downstate Health Access Fund	048	525,000	0	0	0	525,000
Alzheimer's Disease Research Fund	060	200,000	116,883	55,505	172,388	27,612
Public Health Services Fund	063	157,531,700	103,271,966	13,957,277	117,229,243	40,302,457
Community Health Center Fund	113	1,200,000	104,000	0	104,000	1,096,000
Facility Licensing Fund	118	676,000	371,314	14,557	385,871	290,129
Illinois School Asbestos Abatement Fund	175	1,000,000	721,835	50,229	772,064	227,936
Illinois Health Facilities Planning Fund	238	1,809,600	1,030,285	107,163	1,137,448	672,152
Emergency Public Health Fund	240	3,500,000	2,653,712	0	2,653,712	846,288
Public Health Water Permit Fund	256	200,000	39,625	13,650	53,275	146,725
Nurse Dedicated and Professional Fund	258	750,000	730,058	0	730,058	19,942
Long Term Care Monitor/Receiver Fund	285	645,300	228,138	45,443	273,581	371,719
Used Tire Management Fund	294	500,000	394,268	93,156	487,424	12,576
Public Health Services Revolving Fund	340	3,078,000	2,076,930	23,188	2,100,118	977,882
Lead Poisoning, Screening, Prevention and Abatement Fund	360	5,243,100	2,528,457	394,219	2,922,676	2,320,424
Tanning Facility Permit Fund	370	500,000	230,106	82,298	312,404	187,596
Plumbing Licensure and Program Fund	372	1,400,000	1,120,191	134,879	1,255,070	144,930
Regulatory Evaluation and Basic Enforcement Fund	388	150,000	13,434	573	14,007	135,993
Trauma Center Fund	397	6,000,000	109,389	4,616,983	4,726,372	1,273,628
EMS Assistance Fund	398	300,000	45,705	95,171	140,876	159,124
Federal Civil Preparedness Administrative Fund	497	2,100,000	0	9,656	9,656	2,090,344
Health Facility Plan Review Fund	524	2,250,000	1,150,211	77,161	1,227,372	1,022,628
Pesticide Control Fund	576	200,000	133,953	9,181	143,134	56,866
Prostate Cancer Research Fund	626	300,000	43,414	54,586	98,000	202,000
Death Certificate Surcharge Fund	635	3,332,000	660,755	16,705	677,460	2,654,540
Assisted Living and Shared Housing Regulatory Fund	702	100,000	9,275	21,861	31,136	68,864

STATE OF ILLINOIS
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SCHEDULE OF APPROPRIATIONS, EXPENDITURES AND LAPSED BALANCES
For The Fiscal Year Ended June 30, 2004

P.A. 93-90, 93-92, 93-635 FISCAL YEAR 2004	Fund Number	Appropriations (Net of Transfers)	Expenditures Through June 30	Lapse Period Expenditures July 1 to August 31	Total Expenditures 14 Months Ended August 31	Balances Lapsed August 31
Tobacco Settlement Recovery Fund	733	16,900,000	8,856,752	2,054,416	10,911,168	5,988,832
Public Health Federal Projects Fund	838	812,000	191,347	15,495	206,842	605,158
Maternal and Child Health Services Block Fund	872	1,140,000	595,306	150,834	746,140	393,860
Preventive Health and Health Services Block Fund	873	4,288,500	1,788,425	489,719	2,278,144	2,010,356
Public Health Special State Projects Fund	896	3,265,000	420,283	61,994	482,277	2,782,723
Metabolic Screening and Treatment Fund	920	8,055,100	5,393,375	684,463	6,077,838	1,977,262
Hearing Instrument Dispenser Examining and Disciplinary Fund	938	120,000	72,100	2,895	74,995	45,005
Illinois State Podiatric Disciplinary Fund	954	65,000	51,469	0	51,469	13,531
 Total Fiscal Year 2004		<u>\$ 350,023,089</u>	<u>\$ 233,910,013</u>	<u>\$ 35,868,350</u>	<u>\$ 269,778,363</u>	<u>\$ 80,244,726</u>

Note: Appropriations, expenditures, and lapsed balances were obtained from Agency records and have been reconciled to records of the State Comptroller.

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
**COMPARATIVE SCHEDULE OF NET APPROPRIATIONS,
EXPENDITURES AND LAPSED BALANCES**
For the Fiscal Years Ended June 30,

	Fiscal Year		
	2005	2004	2003
	P.A. 93-0681	P.A. 93-90	
	P.A. 93-0842	P.A. 93-92	P.A. 92-0538
	P.A. 93-1070	P.A. 63-635	
General Revenue Fund - 001			
Appropriations (Net of Transfers)	\$ 122,787,293	\$ 119,486,789	\$ 125,521,000
Expenditures:			
Personal Services	35,435,116	34,617,607	38,571,341
Employee Retirement Contributions paid by Employer	30,743	684,979	1,436,135
State Contributions to State Employees' Retirement System	5,590,861	3,081,046	3,986,985
State Contributions to Social Security	2,539,977	2,520,448	2,827,614
Contractual Services	1,752,375	5,324,014	8,518,357
Travel	1,275,330	1,303,464	1,316,107
Commodities	451,157	477,080	474,267
Printing	163,038	174,086	225,467
Equipment	10,108	174,265	27,490
Electronic Data Processing	518,815	540,941	497,178
Telecommunications Services	811,520	813,555	856,214
Operation of Automotive Equipment	27,138	37,230	45,442
Lump Sums and Other Purposes	32,090,711	25,488,425	21,863,733
Lump Sums, Operations	4,363,844	5,307,877	6,002,264
Interfund Cash Transfers	928,700	931,000	1,150,000
Awards and Grants	12,669,606	6,827,317	8,932,098
Medical and Food Supplies For Free Education	3,815,229	3,286,534	4,409,394
Medical Services, Payments to Providers	589,333	625,988	649,983
Grants to Local Governments	15,408,600	17,085,448	15,441,400
Grants to Other State Agencies	0	0	375,000
Awards and Grants - Lump Sum	122,526	213,607	140,135
Other Refunds	37,312	38,729	30,338
Total Expenditures	<u>118,632,039</u>	<u>109,553,640</u>	<u>117,776,942</u>
Lapsed Balances	<u>\$ 4,155,254</u>	<u>\$ 9,933,149</u>	<u>\$ 7,744,058</u>

STATE OF ILLINOIS
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EXPENDITURES AND LAPSED BALANCES**
For the Fiscal Years Ended June 30,

	Fiscal Year		
	2005	2004	2003
	P.A. 93-0681	P.A. 93-90	
	P.A. 93-0842	P.A. 93-92	P.A. 92-0538
	P.A. 93-1070	P.A. 63-635	
Food and Drug Safety Fund - 014			
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Appropriations			
(Net of Transfers)	\$ 1,727,600	\$ 1,800,000	\$ 1,800,000
Expenditures:			
Lump Sums and Other Purposes	1,046,510	1,162,586	1,077,714
Lapsed Balances	\$ 681,090	\$ 637,414	\$ 722,286
Penny Seaverns Breast and Cervical Cancer			
Fund - 015			
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Appropriations			
(Net of Transfers)	\$ 600,000	\$ 600,000	\$ 600,000
Expenditures:			
Awards and Grants	499,136	575,919	361,920
Lapsed Balances	\$ 100,864	\$ 24,081	\$ 238,080
Rural/Downstate Health Access Fund - 048			
<hr/>			
Appropriations			
(Net of Transfers)	\$ 525,000	\$ 525,000	\$ 525,000
Expenditures:			
Lump Sums and Other Purposes	0	0	81,072
Lapsed Balances	\$ 525,000	\$ 525,000	\$ 443,928

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For the Fiscal Years Ended June 30,

	Fiscal Year		
	2005	2004	2003
	P.A. 93-0681	P.A. 93-90	P.A. 92-0538
	P.A. 93-0842	P.A. 93-92	
	P.A. 93-1070	P.A. 63-635	
<u>Alzheimer's Disease Research Fund - 060</u>			
Appropriations			
(Net of Transfers)	\$ 200,000	\$ 200,000	\$ 200,000
Expenditures:			
Awards and Grants	192,485	172,388	194,811
Lapsed Balances	\$ 7,515	\$ 27,612	\$ 5,189
<u>Lou Gherig's Disease Research Fund - 061</u>			
Appropriations			
(Net of Transfers)	\$ 100,000	\$ 0	\$ 0
Expenditures:			
Awards and Grants	98,000	0	0
Lapsed Balances	\$ 2,000	\$ 0	\$ 0

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For the Fiscal Years Ended June 30,

	Fiscal Year		
	2005	2004	2003
	P.A. 93-0681	P.A. 93-90	
	P.A. 93-0842	P.A. 93-92	P.A. 92-0538
	P.A. 93-1070	P.A. 63-635	
Public Health Services Fund - 063			
Appropriations (Net of Transfers)	\$ 157,850,871	\$ 157,531,700	\$ 120,290,300
Expenditures:			
Personal Services	10,074,474	10,462,078	9,730,685
Employee Retirement Contributions paid by Employer	176,693	246,900	384,321
State Contributions to State Employees' Retirement System	1,623,521	1,410,037	1,005,262
State Contributions to Social Security	758,573	791,315	734,378
Employer Contributions to Group Insurance	2,200,589	1,811,443	1,606,795
Contractual Services	3,480,368	2,888,895	3,368,145
Travel	844,200	871,367	801,525
Commodities	411,799	565,426	488,369
Printing	26,153	33,166	52,119
Equipment	339,039	543,253	521,533
Telecommunications Services	181,694	162,483	231,090
Operation of Automotive Equipment	7,130	4,369	6,348
Lump Sums and Other Purposes	97,929,556	86,887,483	56,848,312
Lump Sums, Operations	595,312	127,165	640,982
Awards and Grants	5,811,053	6,357,360	5,062,711
Awards and Grants - Lump Sum	5,325,937	4,066,503	5,089,221
Refunds of Federal Grants	40,412	0	16,789
Total Expenditures	129,826,503	117,229,243	86,588,585
Lapsed Balances	\$ 28,024,368	\$ 40,302,457	\$ 33,701,715

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For the Fiscal Years Ended June 30,

	2005	Fiscal Year 2004	2003
	P.A. 93-0681	P.A. 93-90	
	P.A. 93-0842	P.A. 93-92	P.A. 92-0538
	P.A. 93-1070	P.A. 63-635	
Community Health Center Fund - 113			
Appropriations (Net of Transfers)	\$ 1,185,600	\$ 1,200,000	\$ 1,200,000
Expenditures:			
Lump Sums and Other Purposes	144,226	104,000	601,111
Lapsed Balances	\$ 1,041,374	\$ 1,096,000	\$ 598,889
Facility Licensing Fund - 118			
Appropriations (Net of Transfers)	\$ 659,651	\$ 676,000	\$ 676,000
Expenditures:			
Lump Sums and Other Purposes	361,870	385,871	145,353
Lapsed Balances	\$ 297,781	\$ 290,129	\$ 530,647
Illinois School Asbestos Abatement Fund - 175			
Appropriations (Net of Transfers)	\$ 952,500	\$ 1,000,000	\$ 1,000,000
Expenditures:			
Lump Sums and Other Purposes	706,355	772,064	702,210
Lapsed Balances	\$ 246,145	\$ 227,936	\$ 297,790

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For the Fiscal Years Ended June 30,

	Fiscal Year		
	2005	2004	2003
	P.A. 93-0681	P.A. 93-90	
	P.A. 93-0842	P.A. 93-92	P.A. 92-0538
	P.A. 93-1070	P.A. 63-635	
Illinois Health Facilities Planning Fund - 238			
Appropriations (Net of Transfers)	\$ 1,809,056	\$ 1,809,600	\$ 1,798,500
Expenditures:			
Personal Services	514,446	540,964	489,037
Employee Retirement Contributions paid by Employer	6,612	4,050	15,750
State Contributions to State Employees' Retirement System	82,900	72,758	50,488
State Contributions to Social Security	47,002	47,854	45,821
Employer Contributions to Group Insurance	112,770	90,381	59,843
Contractual Services	334,067	307,450	371,464
Travel	35,228	37,790	14,277
Commodities	2,940	4,198	1,175
Printing	60	15	0
Equipment	18,881	17,762	0
Telecommunications Services	9,800	14,226	478
Total Expenditures	1,164,706	1,137,448	1,048,333
Lapsed Balances	\$ 644,350	\$ 672,152	\$ 750,167
Emergency Public Health Fund - 240			
Appropriations (Net of Transfers)	\$ 3,413,600	\$ 3,500,000	\$ 0
Expenditures:			
Lump Sums and Other Purposes	2,122,236	2,653,712	0
Lapsed Balances	\$ 1,291,364	\$ 846,288	\$ 0

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For the Fiscal Years Ended June 30,

	Fiscal Year		
	2005	2004	2003
	P.A. 93-0681	P.A. 93-90	
	P.A. 93-0842	P.A. 93-92	P.A. 92-0538
	P.A. 93-1070	P.A. 63-635	
Public Health Water Permit Fund - 256			
Appropriations (Net of Transfers)	\$ 200,000	\$ 200,000	\$ 200,000
Expenditures:			
Lump Sums and Other Purposes	46,292	53,275	57,827
Lapsed Balances	\$ 153,708	\$ 146,725	\$ 142,173
Nurse Dedicated and Professional Fund - 258			
Appropriations (Net of Transfers)	\$ 750,000	\$ 750,000	\$ 750,000
Expenditures:			
Lump Sums and Other Purposes	595,125	730,058	749,243
Lapsed Balances	\$ 154,875	\$ 19,942	\$ 757
Long Term Care Monitor/Receiver Fund - 285			
Appropriations (Net of Transfers)	\$ 607,800	\$ 645,300	\$ 845,300
Expenditures:			
Lump Sums and Other Purposes	595,622	273,581	233,686
Lapsed Balances	\$ 12,178	\$ 371,719	\$ 611,614
Used Tire Management Fund - 294			
Appropriations (Net of Transfers)	\$ 500,000	\$ 500,000	\$ 500,000
Expenditures:			
Lump Sums and Other Purposes	416,675	487,424	495,044
Lapsed Balances	\$ 83,325	\$ 12,576	\$ 4,956

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DEPARTMENT OF PUBLIC HEALTH
**COMPARATIVE SCHEDULE OF NET APPROPRIATIONS,
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For the Fiscal Years Ended June 30,

	2005	Fiscal Year 2004	2003
	P.A. 93-0681	P.A. 93-90	
	P.A. 93-0842	P.A. 93-92	P.A. 92-0538
	P.A. 93-1070	P.A. 63-635	
Public Health Services Revolving Fund - 340			
Appropriations (Net of Transfers)	\$ 3,078,000	\$ 3,078,000	\$ 3,078,000
Expenditures:			
Lump Sums and Other Purposes	1,006,254	2,100,118	2,319,478
Lapsed Balances	\$ 2,071,746	\$ 977,882	\$ 758,522
Lead Poisoning, Screening, Prevention and Abatement Fund - 360			
Appropriations (Net of Transfers)	\$ 4,918,540	\$ 5,243,100	\$ 5,243,100
Expenditures:			
Lump Sums and Other Purposes	1,448,344	1,693,541	1,803,073
Lump Sums, Operations	24,621	62,055	57,031
Awards and Grants	1,183,745	1,167,080	1,165,829
Total Expenditures	2,656,710	2,922,676	3,025,933
Lapsed Balances	\$ 2,261,830	\$ 2,320,424	\$ 2,217,167
Tanning Facility Permit Fund - 370			
Appropriations (Net of Transfers)	\$ 500,000	\$ 500,000	\$ 500,000
Expenditures:			
Lump Sums and Other Purposes	313,300	312,404	405,255
Lapsed Balances	\$ 186,700	\$ 187,596	\$ 94,745

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
**COMPARATIVE SCHEDULE OF NET APPROPRIATIONS,
EXPENDITURES AND LAPSED BALANCES**
For the Fiscal Years Ended June 30,

	Fiscal Year		
	2005	2004	2003
	P.A. 93-0681	P.A. 93-90	
	P.A. 93-0842	P.A. 93-92	P.A. 92-0538
	P.A. 93-1070	P.A. 63-635	
Innovations in Long-Term Care Quality			
Demonstration Grants Fund -371			
<hr style="border: 1px solid black;"/>			
Appropriations			
(Net of Transfers)	\$ 1,000,000	\$ 0	\$ 0
Expenditures:			
Lump Sums and Other Purposes	0	0	0
Lapsed Balances	\$ 1,000,000	\$ 0	\$ 0
Plumbing Licensure and Program Fund - 372			
<hr style="border: 1px solid black;"/>			
Appropriations			
(Net of Transfers)	\$ 1,309,582	\$ 1,400,000	\$ 1,400,000
Expenditures:			
Lump Sums and Other Purposes	1,030,080	1,255,070	1,252,210
Lapsed Balances	\$ 279,502	\$ 144,930	\$ 147,790
End Stage Renal Disease			
Facility Licensing Fund - 381			
<hr style="border: 1px solid black;"/>			
Appropriations			
(Net of Transfers)	\$ 385,000	\$ 0	\$ 0
Expenditures:			
Awards and Grants	0	0	0
Lapsed Balances	\$ 385,000	\$ 0	\$ 0

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
**COMPARATIVE SCHEDULE OF NET APPROPRIATIONS,
EXPENDITURES AND LAPSED BALANCES**
For the Fiscal Years Ended June 30,

	2005	Fiscal Year 2004	2003
	P.A. 93-0681	P.A. 93-90	
	P.A. 93-0842	P.A. 93-92	P.A. 92-0538
	P.A. 93-1070	P.A. 63-635	
Regulatory Evaluation and Basic Enforcement Fund - 388			
Appropriations (Net of Transfers)	\$ 150,000	\$ 150,000	\$ 150,000
Expenditures:			
Lump Sums and Other Purposes	30,201	14,007	16,460
Lapsed Balances	\$ 119,799	\$ 135,993	\$ 133,540
Trauma Center Fund - 397			
Appropriations (Net of Transfers)	\$ 6,000,000	\$ 6,000,000	\$ 5,500,000
Expenditures:			
Lump Sums and Other Purposes	5,049,139	4,726,372	4,851,012
Lapsed Balances	\$ 950,861	\$ 1,273,628	\$ 648,988
EMS Assistance Fund - 398			
Appropriations (Net of Transfers)	\$ 300,000	\$ 300,000	\$ 500,000
Expenditures:			
Lump Sums and Other Purposes	22,265	140,876	150,349
Lapsed Balances	\$ 277,735	\$ 159,124	\$ 349,651

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
**COMPARATIVE SCHEDULE OF NET APPROPRIATIONS,
EXPENDITURES AND LAPSED BALANCES**
For the Fiscal Years Ended June 30,

	2005	Fiscal Year 2004	2003
	P.A. 93-0681	P.A. 93-90	
	P.A. 93-0842	P.A. 93-92	P.A. 92-0538
	P.A. 93-1070	P.A. 63-635	
Federal Civil Preparedness			
Administrative Fund - 497			
Appropriations (Net of Transfers)	\$ 2,100,000	\$ 2,100,000	\$ 0
Expenditures:			
Lump Sums and Other Purposes	438,446	9,656	0
Lapsed Balances	\$ 1,661,554	\$ 2,090,344	\$ 0
Health Facility Plan Review Fund - 524			
Appropriations (Net of Transfers)	\$ 2,218,559	\$ 2,250,000	\$ 3,397,000
Expenditures:			
Lump Sums and Other Purposes	1,645,074	1,227,372	1,906,905
Lapsed Balances	\$ 573,485	\$ 1,022,628	\$ 1,490,095
Pesticide Control Fund - 576			
Appropriations (Net of Transfers)	\$ 200,000	\$ 200,000	\$ 200,000
Expenditures:			
Lump Sums and Other Purposes	194,094	143,134	96,119
Lapsed Balances	\$ 5,906	\$ 56,866	\$ 103,881

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
**COMPARATIVE SCHEDULE OF NET APPROPRIATIONS,
EXPENDITURES AND LAPSED BALANCES**
For the Fiscal Years Ended June 30,

	2005	Fiscal Year 2004	2003
	P.A. 93-0681	P.A. 93-90	
	P.A. 93-0842	P.A. 93-92	P.A. 92-0538
	P.A. 93-1070	P.A. 63-635	
Prostate Cancer Research Fund - 626			
Appropriations (Net of Transfers)	\$ 500,000	\$ 300,000	\$ 100,000
Expenditures:			
Awards and Grants	181,003	98,000	0
Lapsed Balances	\$ 318,997	\$ 202,000	\$ 100,000
Death Certificate Surcharge Fund - 635			
Appropriations (Net of Transfers)	\$ 3,082,000	\$ 3,332,000	\$ 2,200,000
Expenditures:			
Lump Sums and Other Purposes	383,941	677,460	0
Lapsed Balances	\$ 2,698,059	\$ 2,654,540	\$ 2,200,000
Leukemia Treatment and Education Fund - 691			
Appropriations (Net of Transfers)	\$ 100,000	\$ 0	\$ 0
Expenditures:			
Awards and Grants	64,300	0	0
Lapsed Balances	\$ 35,700	\$ 0	\$ 0

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
**COMPARATIVE SCHEDULE OF NET APPROPRIATIONS,
EXPENDITURES AND LAPSED BALANCES**
For the Fiscal Years Ended June 30,

	2005	Fiscal Year 2004	2003
	P.A. 93-0681	P.A. 93-90	
	P.A. 93-0842	P.A. 93-92	P.A. 92-0538
	P.A. 93-1070	P.A. 63-635	
Assisted Living and Shared Housing			
Regulatory Fund - 702			
<hr/>			
Appropriations (Net of Transfers)	\$ 100,000	\$ 100,000	\$ 100,000
Expenditures:			
Lump Sums, Operations	97,865	31,136	1,962
Lapsed Balances	\$ 2,135	\$ 68,864	\$ 98,038
	<u> </u>	<u> </u>	<u> </u>
<hr/>			
Post Transplant Maintenance Fund - 712			
<hr/>			
Appropriations (Net of Transfers)	\$ 0	\$ 0	\$ 200,000
Expenditures:			
Lump Sums and Other Purposes	0	0	0
Lapsed Balances	\$ 0	\$ 0	\$ 200,000
	<u> </u>	<u> </u>	<u> </u>
<hr/>			
Asthma and Lung Research Fund - 713			
<hr/>			
Appropriations (Net of Transfers)	\$ 100,000	\$ 0	\$ 0
Expenditures:			
Awards and Grants	72,882	0	0
Lapsed Balances	\$ 27,118	\$ 0	\$ 0
	<u> </u>	<u> </u>	<u> </u>

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
**COMPARATIVE SCHEDULE OF NET APPROPRIATIONS,
EXPENDITURES AND LAPSED BALANCES**
For the Fiscal Years Ended June 30,

	2005	Fiscal Year 2004	2003
	P.A. 93-0681	P.A. 93-90	
	P.A. 93-0842	P.A. 93-92	P.A. 92-0538
	P.A. 93-1070	P.A. 63-635	
Spinal Cord Injury Paralysis Cure			
Research Trust Fund - 714			
Appropriations (Net of Transfers)	\$ 100,000	\$ 0	\$ 0
Expenditures:			
Awards and Grants	98,000	0	0
Lapsed Balances	\$ 2,000	\$ 0	\$ 0
Tobacco Settlement Recovery Fund - 733			
Appropriations (Net of Transfers)	\$ 15,900,000	\$ 16,900,000	\$ 19,100,000
Expenditures:			
Awards and Grants	8,250,626	8,608,483	8,068,478
Grants to Other State Agencies	1,862,000	1,862,000	4,100,000
Awards and Grants - Lump Sum	482,161	440,685	2,035,077
Total Expenditures	10,594,787	10,911,168	14,203,555
Lapsed Balances	\$ 5,305,213	\$ 5,988,832	\$ 4,896,445
Public Health Federal Projects Fund - 838			
Appropriations (Net of Transfers)	\$ 812,000	\$ 812,000	\$ 800,000
Expenditures:			
Lump Sums and Other Purposes	190,804	206,842	146,781
Lapsed Balances	\$ 621,196	\$ 605,158	\$ 653,219

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
**COMPARATIVE SCHEDULE OF NET APPROPRIATIONS,
EXPENDITURES AND LAPSED BALANCES**
For the Fiscal Years Ended June 30,

	Fiscal Year		
	2005	2004	2003
	P.A. 93-0681	P.A. 93-90	
	P.A. 93-0842	P.A. 93-92	P.A. 92-0538
	P.A. 93-1070	P.A. 63-635	
Maternal and Child Health			
Services Block Fund - 872			
<hr/>			
Appropriations			
(Net of Transfers)	\$ 3,541,800	\$ 1,140,000	\$ 1,140,000
Expenditures:			
Lump Sums, Operations	313,466	415,252	349,204
Awards and Grants	2,709,017	330,888	384,962
	3,022,483	746,140	734,166
Total Expenditures			
Lapsed Balances	\$ 519,317	\$ 393,860	\$ 405,834
Preventive Health and Health			
Services Block Fund - 873			
<hr/>			
Appropriations			
(Net of Transfers)	\$ 4,388,500	\$ 4,288,500	\$ 5,221,800
Expenditures:			
Lump Sums and Other Purposes	1,885,097	1,839,107	2,010,581
Awards and Grants - Lump Sum	952,853	439,037	79,850
	2,837,950	2,278,144	2,090,431
Total Expenditures			
Lapsed Balances	\$ 1,550,550	\$ 2,010,356	\$ 3,131,369

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
**COMPARATIVE SCHEDULE OF NET APPROPRIATIONS,
EXPENDITURES AND LAPSED BALANCES**
For the Fiscal Years Ended June 30,

	Fiscal Year		
	2005	2004	2003
	P.A. 93-0681	P.A. 93-90	
	P.A. 93-0842	P.A. 93-92	P.A. 92-0538
	P.A. 93-1070	P.A. 63-635	
Public Health Special State Projects Fund - 896			
Appropriations (Net of Transfers)	\$ 3,625,000	\$ 3,265,000	\$ 3,115,000
Expenditures:			
Lump Sums and Other Purposes	2,087,324	482,277	333,192
Awards and Grants	75,000	0	0
Total Expenditures	2,162,324	482,277	333,192
Lapsed Balances	\$ 1,462,676	\$ 2,782,723	\$ 2,781,808
Metabolic Screening and Treatment Fund - 920			
Appropriations (Net of Transfers)	\$ 8,915,200	\$ 8,055,100	\$ 7,805,100
Expenditures:			
Lump Sums and Other Purposes	3,703,243	3,006,016	2,892,457
Lump Sums, Operations	924,778	863,249	737,937
Awards and Grants	1,956,176	1,556,925	1,530,912
Medical and Food Supplies For Free Distribution	1,162,628	651,648	754,706
Total Expenditures	7,746,825	6,077,838	5,916,012
Lapsed Balances	\$ 1,168,375	\$ 1,977,262	\$ 1,889,088
Hearing Instrument Dispenser Examining and Disciplinary Fund - 938			
Appropriations (Net of Transfers)	\$ 104,500	\$ 120,000	\$ 120,000
Expenditures:			
Lump Sums and Other Purposes	65,349	74,995	73,396
Lapsed Balances	\$ 39,151	\$ 45,005	\$ 46,604

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
**COMPARATIVE SCHEDULE OF NET APPROPRIATIONS,
EXPENDITURES AND LAPSED BALANCES**
For the Fiscal Years Ended June 30,

	2005	Fiscal Year 2004	2003
	P.A. 93-0681	P.A. 93-90	
	P.A. 93-0842	P.A. 93-92	P.A. 92-0538
	P.A. 93-1070	P.A. 63-635	
Illinois State Podiatric Disciplinary Fund - 954			
Appropriations (Net of Transfers)	\$ 65,000	\$ 65,000	\$ 65,000
Expenditures:			
Lump Sums and Other Purposes	27,062	51,469	46,868
Lapsed Balances	\$ 37,938	\$ 13,531	\$ 18,132
Grand Total - All Appropriated Funds			
Appropriations (Net of transfers)	\$ 357,362,652	\$ 350,023,089	\$ 315,841,100
Total Expenditures	296,378,918	269,778,363	247,683,935
Lapsed Balances	\$ 60,983,734	\$ 80,244,726	\$ 68,157,165
State Officers' Salaries General Revenue Fund - 001			
Appropriations (Net of Transfers)	\$ 236,100	\$ 236,100	\$ 236,100
Expenditures:			
Director's Salary	127,600	127,600	127,582
Assistant Director's Salary	108,500	93,686	45,194
Total Expenditures	236,100	221,286	172,776
Lapsed Balances	\$ 0	\$ 14,814	\$ 63,324

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
**COMPARATIVE SCHEDULE OF NET APPROPRIATIONS,
EXPENDITURES AND LAPSED BALANCES**
For the Fiscal Years Ended June 30,

	Fiscal Year		
	2005	2004	2003
	P.A. 93-0681	P.A. 93-90	
	P.A. 93-0842	P.A. 93-92	
	P.A. 93-1070	P.A. 63-635	P.A. 92-0538
<u>Total - All Appropriated Funds</u>			
Appropriations (Net of Transfers)	\$ 357,362,652	\$ 350,023,089	\$ 315,841,100
<u>Expenditures</u>			
Personal Services	46,024,036	45,620,649	48,791,063
Employee Retirement Contributions paid by Employer	214,048	935,929	1,836,206
State Contributions to State Employees' Retirement System	7,297,282	4,563,841	5,042,735
State Contributions to Social Security	3,345,552	3,359,617	3,607,813
Group Insurance	2,313,359	1,901,824	1,666,638
Contractual Services	5,566,810	8,520,359	12,257,966
Travel	2,154,758	2,212,621	2,131,909
Commodities	865,896	1,046,704	963,811
Printing	189,251	207,267	277,586
Equipment	368,028	735,280	549,023
Electronic Data Processing	518,815	540,941	497,178
Telecommunications Services	1,003,014	990,264	1,087,782
Operation of Automotive Equipment	34,268	41,599	51,790
Lump Sums and Other Purposes	155,575,195	136,959,195	101,159,441
Lump Sums, Operations	6,319,886	6,806,734	7,789,380
Interfund Cash Transfers	928,700	931,000	1,150,000
Awards and Grants	33,861,029	25,694,360	25,781,571
Medical and Food Supplies For Free Distribution	4,977,857	3,938,182	5,164,100
Medical Services, Payments to Providers	589,333	625,988	649,983
Grants to Local Governments	15,408,600	17,085,448	15,441,400
Grants to Other State Agencies	1,862,000	1,862,000	4,475,000
Awards and Grants - Lump Sum	6,883,477	5,159,832	7,264,433
Other Refunds	37,312	38,729	30,338
Refunds of Federal Grants	40,412	0	16,789
Total Expenditures	296,378,918	269,778,363	247,683,935
Lapsed Balances	\$ 60,983,734	\$ 80,244,726	\$ 68,157,165

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
**COMPARATIVE SCHEDULE OF NET APPROPRIATIONS,
EXPENDITURES AND LAPSED BALANCES**

For the Fiscal Years Ended June 30,

	Fiscal Year		
	2005	2004	2003
Total by Fund - All Funds	P.A. 93-0681 P.A. 93-0842 P.A. 93-1070	P.A. 93-90 P.A. 93-92 P.A. 63-635	P.A. 92-0538
Appropriations (Net of Transfers)	\$ 357,362,652	\$ 350,023,089	\$ 315,841,100
<u>Expenditures</u>			
General Revenue Fund	001 118,632,039	109,553,640	117,776,942
Food and Drug Safety Fund	014 1,046,510	1,162,586	1,077,714
Penny Severns Breast and Cervical Cancer Fund	015 499,136	575,919	361,920
Rural/Downstate Health Access Fund	048 0	0	81,072
Alzheimer's Disease Research Fund	060 192,485	172,388	194,811
Lou Gherig's Disease Research Fund	061 98,000	0	0
Public Health Services Fund	063 129,826,503	117,229,243	86,588,585
Community Health Center Fund	113 144,226	104,000	601,111
Facility Licensing Fund	118 361,870	385,871	145,353
Illinois School Asbestos Abatement Fund	175 706,355	772,064	702,210
Illinois Health Facilities Planning Fund	238 1,164,706	1,137,448	1,048,333
Emergency Public Health Fund	240 2,122,236	2,653,712	0
Public Health Water Permit Fund	256 46,292	53,275	57,827
Nurse Dedicated and Professional Fund	258 595,125	730,058	749,243
Long Term Care Monitor/Receiver Fund	285 595,622	273,581	233,686
Used Tire Management Fund	294 416,675	487,424	495,044
Public Health Services Revolving Fund	340 1,006,254	2,100,118	2,319,478
Lead Poisoning, Screening, Prevention and Abatement Fund	360 2,656,710	2,922,676	3,025,933
Tanning Facility Permit Fund	370 313,300	312,404	405,255
Innovations in Long Term Care Quality Demonstration Grants Fund	371 0	0	0
Plumbing Licensure and Program Fund	372 1,030,080	1,255,070	1,252,210
End Stage Renal Disease Facility Licensing Fund	381 0	0	0
Regulatory Evaluation and Basic Enforcement Fund	388 30,201	14,007	16,460

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
**COMPARATIVE SCHEDULE OF NET APPROPRIATIONS,
EXPENDITURES AND LAPSED BALANCES**

For the Fiscal Years Ended June 30,

		Fiscal Year		
		2005	2004	2003
Total by Fund - All Funds		P.A. 93-0681 P.A. 93-0842 P.A. 93-1070	P.A. 93-90 P.A. 93-92 P.A. 63-635	P.A. 92-0538
Trauma Center Fund	397	5,049,139	4,726,372	4,851,012
EMS Assistance Fund	398	22,265	140,876	150,349
Federal Civil Preparedness				
Administrative Fund	497	438,446	9,656	0
Health Facility Plan Review Fund	524	1,645,074	1,227,372	1,906,905
Pesticide Control Fund	576	194,094	143,134	96,119
Prostate Cancer Research Fund	626	181,003	98,000	0
Death Certificate Surcharge Fund	635	383,941	677,460	0
Leukemia Treatment and Education Fund	691	64,300	0	0
Assisted Living and Shared				
Housing Regulatory Fund	702	97,865	31,136	1,962
Post Transplant Maintenance Fund	712	0	0	0
Asthma and Lung Research Fund	713	72,882	0	0
Spinal Cord Injury Paralysis				
Cure Research Fund	714	98,000	0	0
Tobacco Settlement Recovery Fund	733	10,594,787	10,911,168	14,203,555
Public Health Federal Projects Fund	838	190,804	206,842	146,781
Maternal and Child Health				
Services Block Fund	872	3,022,483	746,140	734,166
Preventive Health and Health				
Services Block Fund	873	2,837,950	2,278,144	2,090,431
Public Health Special State Projects Fund	896	2,162,324	482,277	333,192
Metabolic Screening and Treatment Fund	920	7,746,825	6,077,838	5,916,012
Hearing Instrument Dispenser				
Examining and Disciplinary Fund	938	65,349	74,995	73,396
Illinois State Podiatric Disciplinary Fund	954	27,062	51,469	46,868
Total Expenditures		<u>296,378,918</u>	<u>269,778,363</u>	<u>247,683,935</u>
Lapse Balances		<u>\$ 60,983,734</u>	<u>\$ 80,244,726</u>	<u>\$ 68,157,165</u>

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
SCHEDULE OF EFFICIENCY INITIATIVE PAYMENTS
For the Two Years Ended June 30, 2005

<u>Procurement Efficiency Initiative</u>	<u>FY05</u>	<u>FY04</u>
General Revenue Fund - 001		
Personal Services		\$ 400,000
State Contributions to State Employees' Retirement System		52,000
State Contributions to Social Security		30,178
Contractual Services		135,000
Travel		45,000
Equipment		105,000
Electronic Data Processing		50,000
Lump Sums		150,000
Awards and Grants		35,000
Food and Drug Safety Fund - 014		
Lump Sums		72,400
Community Health Center Care Fund - 113		
Lump Sums		14,400
Facility Licensing Fund - 118		
Lump Sums		16,100
Illinois School Asbestos Abatement Fund - 175		
Lump Sums		47,500
Illinois Health Facilities Planning Fund - 238		
Contractual Services		53,300
Travel		10,000
Equipment		10,000
Emergency Public Health Fund - 240		
Lump Sums		86,400
Long Term Care Monitor/Receiver Fund - 285		
Lump Sums		37,500
Public Health Services Revolving Fund - 340		
Lump Sums		77,100
Lead Poisoning, Screening, Prevention and Abatement Fund - 360		
Lump Sums		64,900
Plumbing Licensure and Program Fund - 372		
Lump Sums		68,600
Health Facility Plan Review Fund - 524		
Lump Sums		31,000

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
SCHEDULE OF EFFICIENCY INITIATIVE PAYMENTS
For the Two Years Ended June 30, 2005

<u>Procurement Efficiency Initiative (Continued)</u>	FY05	FY04
Public Health Special State Projects Fund - 896		
Lump Sums	\$ 174,379	
Metabolic Screening and Treatment Fund - 920		
Lump Sums		79,100
Hearing Instrument Dispenser Examining and Disciplinary Fund - 938		
Lump Sums		15,500
Sub-Total	174,379	1,685,978
 <u>Information Technology Initiatives</u>		
General Revenue Fund - 001		
Personal Services		166,000
State Contributions to State Employees' Retirement System		22,300
State Contributions to Social Security		13,259
Contractual Services	20,000	
Electronic Data Processing	157,040	
Lump Sums	180,582	353,033
Death Certificate Surcharge Fund - 635		
Lump Sums		250,000
Public Health Special State Projects Fund - 896		
Lump Sums	362,662	
Metabolic Screening and Treatment Fund - 920		
Lump Sums	37,645	
Sub-Total	757,929	804,592
 <u>Vehicle Fleet Initiatives</u>		
General Revenue Fund - 001		
Lump Sums		30,470
Sub-Total	0	30,470
Grand Total	\$ 932,308	\$ 2,521,040

Note: This schedule includes only those payments made pursuant to 30 ILCS 105/6p-5. Amounts were obtained from the Department and reconciled to information from the Office of the Comptroller.

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
**COMPARATIVE SCHEDULE OF RECEIPTS, DISBURSEMENTS AND
FUND BALANCE (CASH BASIS) - LOCALLY HELD FUND**
For the Two Years Ended June 30, 2005

	Vital Records Refund Account Fund (1322)
Cash Balance at July 1, 2003	\$ 0
Receipts:	
License, Fees, Registrations	86
Disbursements:	
Refunds	86
Cash Balance at June 30, 2004	\$ 0
Cash Balance at July 1, 2004	\$ 0
Receipts:	
License, Fees, Registrations	322
Disbursements:	
Refunds	216
Fund Transfer-Out	89
Cash Balance at June 30, 2005	\$ 17

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
SCHEDULE OF CHANGES IN STATE PROPERTY
For the Two Years Ended June 30, 2005

	Total	Land and Land Improvements	Buildings and Building Improvements	Capital Lease Equipment (1)	Equipment
Balance at July 1, 2003	\$ 29,385,006	\$ 12,331	\$ 398,805	\$ 15,000	\$ 28,958,870
Additions	1,883,580				1,883,580
Deletions	(113,906)				(113,906)
Net Transfers	(935,718)				(935,718)
Balance at June 30, 2004	<u>\$ 30,218,962</u>	<u>\$ 12,331</u>	<u>\$ 398,805</u>	<u>\$ 15,000</u>	<u>\$ 29,792,826</u>
Balance at July 1, 2004	\$ 30,218,962	\$ 12,331	\$ 398,805	\$ 15,000	\$ 29,792,826
Additions	3,121,554		22,353		3,099,201
Deletions	(1,029,994)				(1,029,994)
Net Transfers	(2,602,276)		(421,158)		(2,181,118)
Balance at June 30, 2005	<u>\$ 29,708,246</u>	<u>\$ 12,331</u>	<u>\$ -</u>	<u>\$ 15,000</u>	<u>\$ 29,680,915</u>

Note: The above schedule has been derived from Agency records which have been reconciled to property reports submitted to the Office of the Comptroller.

(1) Capital Lease Equipment was not included in prior report.

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
**COMPARATIVE SCHEDULE OF CASH RECEIPTS AND
RECONCILIATION OF CASH RECEIPTS TO DEPOSITS
REMITTED TO THE STATE COMPTROLLER**

For the Years Ended June 30,

	2005	2004	2003
General Revenue Fund - 001			
Fees and Licenses			
Office of Administrative Services			
Division of Vital Records	\$ 1,607,952	\$ 1,580,565	\$ 1,706,649
Division of Local Health Administration			
Baccalaureate Nursing Degree			
Loan Repayments	2,810	3,499	988
Division of Legal Services - Enforcement Section			
Life Care Facilities Act Fees	1,800	2,200	400
Office of Health Protection			
Division of Environmental Health			
Youth Camp Fees	2,775	2,825	2,875
Mobile Home Park Fees	238,477	237,192	246,505
Modular Safety Fees	101,525	87,150	78,925
Water Well License Fees	18,315	20,435	21,355
Private Sewage Fees	133,880	132,485	141,150
Recreational Area Fees	32,100	33,650	35,750
Division of Food, Drugs and Dairies			
Salvage Warehouse Fees	15,310	12,230	12,710
Office of Health Regulation			
Division of Quality Assurance			
Long-Term Care Directory Fees	586	779	1,038
Division of Health Facilities Standards			
Hospice Fees	12,100	12,050	10,900
Home Health Agency Fees	13,650	11,675	10,600
Ambulatory Surgical Treatment Center Fees	39,100	40,200	38,200
Ambulatory Surgical Treatment Center Fines	0	0	48,800
Health Maintenance Organization Fees	72,649	51,577	118,904
Long Term Care	0	1,206,204	0
Other Revenue			
Freedom of Information Act Fees	13,186	12,515	15,790
Copy Charges	4,875	15,733	11,440
Jury Duty/Witness Fees	6,003	5,135	5,435
Miscellaneous	11,618	13,011	1,019
Fines/Penalties	500	0	0

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
**COMPARATIVE SCHEDULE OF CASH RECEIPTS AND
RECONCILIATION OF CASH RECEIPTS TO DEPOSITS
REMITTED TO THE STATE COMPTROLLER**

For the Years Ended June 30,

	2005	2004	2003
General Revenue Fund - 001 (continued)			
Federal Revenue			
Federal Indirect Cost Reimbursement	39,711	2,413,363	2,632,427
Consumer Product Safety Commission	3,970	2,010	0
U.S. Department of Health and Human Services	890,875	0	896,167
Prior Year Refund	229,133	237,919	437,473
Prior Year Expenditure Transfers			(129)
Total Cash Receipts per Department	3,492,900	6,134,402	6,475,371
Deposits in Transit to the State Comptroller			
Add: Beginning of Year	131,385	109,372	101,669
Less: Ending of Year	(51,937)	(131,385)	(109,372)
Total per State Comptroller's Records	\$ 3,572,348	\$ 6,112,389	\$ 6,467,668
 Food and Drug Safety Fund - 014			
Drug Residue Program	\$ 10,755	\$ 4,793	\$ 7,446
Food Managers Certification Program	1,201,943	1,073,454	993,837
Milk Licensing Program	40,670	56,850	38,180
Formulary Subscription Program	200	2,100	2,450
Health Certificate Program	48,860	44,110	21,350
Interest Income	22,415	18,070	41,435
Prior Year Refund	14	115	0
Prior Year Warrant Voids	0	77	0
Total Cash Receipts per Department	1,324,857	1,199,569	1,104,698
Interest collected by State Treasury	(22,415)	(18,070)	(41,435)
Deposits in Transit to the State Comptroller			
Add: Beginning of Year	53,225	35,025	30,060
Less: Ending of Year	(27,850)	(53,225)	(35,025)
Total per State Comptroller's Records	\$ 1,327,817	\$ 1,163,299	\$ 1,058,298

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
**COMPARATIVE SCHEDULE OF CASH RECEIPTS AND
RECONCILIATION OF CASH RECEIPTS TO DEPOSITS
REMITTED TO THE STATE COMPTROLLER**

For the Years Ended June 30,

	2005	2004	2003
Penny Severns Breast and Cervical Cancer Research Fund - 015			
Private Organizations or Individuals	\$ 0	\$ 30	\$ 0
General Revenue Fund Transfer	244,400	245,000	250,005
Total Cash Receipts per Department	<u>244,400</u>	<u>245,030</u>	<u>250,005</u>
Deposits in Transit to the State Comptroller			
Add: Beginning of Year	0	0	0
Less: Ending of Year	0	0	0
Total per State Comptroller's Records	<u>\$ 244,400</u>	<u>\$ 245,030</u>	<u>\$ 250,005</u>
Rural Downstate Health Access Fund - 048			
Private Organizations or Individuals	\$ 0	\$ 0	\$ 0
Deposits in Transit to the State Comptroller			
Add: Beginning of Year	0	0	6,250
Less: Ending of Year	0	0	0
Total per State Comptroller's Records	<u>\$ 0</u>	<u>\$ 0</u>	<u>\$ 6,250</u>
Alzheimer's Disease Research Fund - 060			
Private Organizations or Individuals	\$ 590	\$ 620	\$ 544
Prior Year Refund	4,843	68	0
Total Cash Receipts per Department	<u>5,433</u>	<u>688</u>	<u>544</u>
Deposits in Transit to the State Comptroller			
Add: Beginning of Year	0	0	0
Less: Ending of Year	0	0	0
Total per State Comptroller's Records	<u>\$ 5,433</u>	<u>\$ 688</u>	<u>\$ 544</u>
Lou Gehrig's Disease Research Fund - 061			
Private Organizations or Individuals	\$ 0	\$ 250	\$ 0
Deposits in Transit to the State Comptroller			
Add: Beginning of Year	0	0	0
Less: Ending of Year	0	0	0
Total per State Comptroller's Records	<u>\$ 0</u>	<u>\$ 250</u>	<u>\$ 0</u>

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
**COMPARATIVE SCHEDULE OF CASH RECEIPTS AND
RECONCILIATION OF CASH RECEIPTS TO DEPOSITS
REMITTED TO THE STATE COMPTROLLER**

For the Years Ended June 30,

	2005	2004	2003
Public Health Services Fund - 063			
Federal Grants	\$ 129,743,542	\$ 110,930,802	\$ 84,670,194
Prior Year Refund	53,366	25,148	43,857
Prior Year Warrant Voids	0	31,673	950
Prior Year Expenditure Transfers			129
Transfers to Fund 371	(6,305)	(543,512)	0
Total Cash Receipts per Department	129,790,603	110,444,111	84,715,130
Deposits in Transit to the State Comptroller			
Add: Beginning of Year	77,705	0	25,684
Less: Ending of Year	(12,106)	(77,705)	0
Total per State Comptroller's Records	\$ 129,856,202	\$ 110,366,406	\$ 84,740,814
 Community Health Center Care Fund - 113			
Residency Scholarship Collections	\$ 102,593	\$ 433,658	\$ 247,515
Deposits in Transit to the State Comptroller			
Add: Beginning of Year	500	7,636	3,943
Less: Ending of Year	0	(500)	(7,636)
Total per State Comptroller's Records	\$ 103,093	\$ 440,794	\$ 243,822
 Safe Bottled Water Fund - 115			
Fees	\$ 16,500	\$ 0	\$ 0
Deposits in Transit to the State Comptroller			
Add: Beginning of Year	0	0	0
Less: Ending of Year	(150)	0	0
Total per State Comptroller's Records	\$ 16,350	\$ 0	\$ 0
 Facility Licensing Fund - 118			
Migrant Camp Fees	\$ 3,800	\$ 4,000	\$ 3,700
Swimming Facility Fees	120,690	134,270	119,725
Manufacture Home Licenses	133,780	131,075	135,926
Total Cash Receipts per Department	258,270	269,345	259,351
Deposits in Transit to the State Comptroller			
Add: Beginning of Year	7,560	4,475	6,210
Less: Ending of Year	(3,975)	(7,560)	(4,475)
Total per State Comptroller's Records	\$ 261,855	\$ 266,260	\$ 261,086

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
**COMPARATIVE SCHEDULE OF CASH RECEIPTS AND
RECONCILIATION OF CASH RECEIPTS TO DEPOSITS
REMITTED TO THE STATE COMPTROLLER**

For the Years Ended June 30,

	2005	2004	2003
Heartsaver AED Fund - 135			
Private Organizations or Individuals	\$ 145	\$ 0	\$ 0
Deposits in Transit to the State Comptroller			
Add: Beginning of Year	0	0	0
Less: Ending of Year	0	0	0
Total per State Comptroller's Records	\$ 145	\$ 0	\$ 0
 Illinois School Asbestos Abatement Fund - 175			
Asbestos Fees	\$ 533,816	\$ 543,751	\$ 591,181
Asbestos Fines	13,478	12,108	49,105
Total Cash Receipts per Department	547,294	555,859	640,286
Deposits in Transit to the State Comptroller			
Add: Beginning of Year	7,290	24,210	17,965
Less: Ending of Year	(5,670)	(7,290)	(24,210)
Total per State Comptroller's Records	\$ 548,914	\$ 572,779	\$ 634,041
 Illinois Health Care Cost Containment Special Studies Fund - 209			
Private Organizations or Individuals	\$ 0	\$ 0	\$ 18,050
Deposits in Transit to the State Comptroller			
Add: Beginning of Year	0	0	0
Less: Ending of Year	0	0	0
Total per State Comptroller's Records	\$ 0	\$ 0	\$ 18,050
 Illinois Health Facilities Planning Fund - 238			
Certificate of Need	\$ 2,178,437	\$ 1,775,576	\$ 1,535,381
Prior Year Refund	91	1,093	16
Total Cash Receipts per Department	2,178,528	1,776,669	1,535,397
Deposits in Transit to the State Comptroller			
Add: Beginning of Year	36,552	36,331	132,893
Less: Ending of Year	(141,904)	(36,552)	(36,331)
Total per State Comptroller's Records	\$ 2,073,176	\$ 1,776,448	\$ 1,631,959

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
**COMPARATIVE SCHEDULE OF CASH RECEIPTS AND
RECONCILIATION OF CASH RECEIPTS TO DEPOSITS
REMITTED TO THE STATE COMPTROLLER**
For the Years Ended June 30,

	2005	2004	2003
Emergency Public Health Fund - 240			
Prior Year Refund	\$ 4,214	\$ 0	\$ 0
Deposits in Transit to the State Comptroller			
Add: Beginning of Year	0	0	0
Less: Ending of Year	0	0	0
Total per State Comptroller's Records	\$ 4,214	\$ 0	\$ 0
Public Health Water Permit Fund - 256			
Water Permits	\$ 65,200	\$ 80,745	\$ 85,925
Deposits in Transit to the State Comptroller			
Add: Beginning of Year	1,700	3,400	2,400
Less: Ending of Year	(2,000)	(1,700)	(3,400)
Total per State Comptroller's Records	\$ 64,900	\$ 82,445	\$ 84,925
Nurse Dedicated and Professional Fund - 258			
Prior Year Refund	\$ 134	\$ 0	\$ 0
Deposits in Transit to the State Comptroller			
Add: Beginning of Year	0	0	0
Less: Ending of Year	0	0	0
Total per State Comptroller's Records	\$ 134	\$ 0	\$ 0
Long-Term Care Monitor/Receiver Fund - 285			
Long Term Care Fees	\$ 876,090	\$ 609,537	\$ 216,250
Long Term Care Fines	334,193	194,106	169,117
Total Cash Receipts per Department	1,210,283	803,643	385,367
Deposits in Transit to the State Comptroller			
Add: Beginning of Year	21,742	14,250	21,600
Less: Ending of Year	(9,066)	(21,742)	(14,250)
Total per State Comptroller's Records	\$ 1,222,959	\$ 796,151	\$ 392,717

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
**COMPARATIVE SCHEDULE OF CASH RECEIPTS AND
RECONCILIATION OF CASH RECEIPTS TO DEPOSITS
REMITTED TO THE STATE COMPTROLLER**

For the Years Ended June 30,

	2005	2004	2003
Public Health Services Revolving Fund - 340			
Laboratory Fees	\$ 830,924	\$ 2,019,531	\$ 1,908,272
Interest Income	7,309	13,072	24,074
Total Cash Receipts per Department	838,233	2,032,603	1,932,346
Interest collected by State Treasury	(7,309)	(13,072)	(24,074)
Deposits in Transit to the State Comptroller			
Add: Beginning of Year	31,366	1,870	15,290
Less: Ending of Year	(1,545)	(31,366)	(1,870)
Total per State Comptroller's Records	\$ 860,745	\$ 1,990,035	\$ 1,921,692
 Lead Poisoning, Screening, Prevention and Abatement Fund - 360			
Laboratory Fees	\$ 37,242	\$ 68,067	\$ 53,594
Lead Inspector Fees	266,395	278,440	293,154
Medicaid - Children	1,188,724	1,787,828	1,964,405
General Revenue Fund Transfer	684,300	686,000	900,000
Total Cash Receipt per Department	2,176,661	2,820,335	3,211,153
Deposits in Transit to the State Comptroller			
Add: Beginning of Year	287,141	5,540	3,557
Less: Ending of Year	(4,033)	(287,141)	(5,540)
Total per State Comptroller's Records	\$ 2,459,769	\$ 2,538,734	\$ 3,209,170
 Tanning Facility Permit Fund - 370			
Tanning Facility Fees	\$ 337,200	\$ 332,176	\$ 315,064
Deposits in Transit to the State Comptroller			
Add: Beginning of Year	9,500	9,450	16,135
Less: Ending of Year	(4,250)	(9,500)	(9,450)
Total per State Comptroller's Records	\$ 342,450	\$ 332,126	\$ 321,749

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
**COMPARATIVE SCHEDULE OF CASH RECEIPTS AND
RECONCILIATION OF CASH RECEIPTS TO DEPOSITS
REMITTED TO THE STATE COMPTROLLER**

For the Years Ended June 30,

	2005	2004	2003
Innovations in Long-Term Care Quality			
Demonstration Grants Fund - 371			
Civil Monetary Penalties	\$ 773,101	\$ 724,275	\$ 0
Interest Income	35,109	0	0
Public Health Services Fund (063) Transfer In	6,305	543,512	0
Total Cash Receipts per Department	<u>814,515</u>	<u>1,267,787</u>	<u>0</u>
Interest collected by State Treasury	(35,109)	0	0
Deposits in Transit to the State Comptroller			
Add: Beginning of Year	6,305	0	0
Less: Ending of Year	(4,520)	(6,305)	0
Total per State Comptroller's Records	<u>\$ 781,191</u>	<u>\$ 1,261,482</u>	<u>\$ 0</u>
Plumbing Licensure and Program Fund - 372			
Plumbing Licenses	\$ 1,635,202	\$ 1,536,817	\$ 1,563,935
Plumbing Violations	8,565	14,650	11,660
Prior Year Warrant Voids	0	0	200
Total Cash Receipts per Department	<u>1,643,767</u>	<u>1,551,467</u>	<u>1,575,795</u>
Interest collected by State Treasury	0	0	0
Deposits in Transit to the State Comptroller			
Add: Beginning of Year	22,120	20,060	18,565
Less: Ending of Year	(11,070)	(22,120)	(20,060)
Total per State Comptroller's Records	<u>\$ 1,654,817</u>	<u>\$ 1,549,407</u>	<u>\$ 1,574,300</u>
Regulatory Evaluation and Basic Enforcement Fund - 388			
Sub-Acute Care Facilities	\$ 46,900	\$ 37,400	\$ 55,900
Prior Year Refund	0	0	700
Total Cash Receipts per Department	<u>46,900</u>	<u>37,400</u>	<u>56,600</u>
Deposits in Transit to the State Comptroller			
Add: Beginning of Year	0	0	1,500
Less: Ending of Year	0	0	0
Total per State Comptroller's Records	<u>\$ 46,900</u>	<u>\$ 37,400</u>	<u>\$ 58,100</u>

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
**COMPARATIVE SCHEDULE OF CASH RECEIPTS AND
RECONCILIATION OF CASH RECEIPTS TO DEPOSITS
REMITTED TO THE STATE COMPTROLLER**

For the Years Ended June 30,

	2005	2004	2003
EMS Assistance Fund - 398			
EMS Ambulance Fees	\$ 77,185	\$ 129,712	\$ 137,442
EMS Ambulance Fines	4,500	1,500	2,500
Total Cash Receipts per Department	81,685	131,212	139,942
Deposits in Transit to the State Comptroller			
Add: Beginning of Year	4,000	4,230	3,025
Less: Ending of Year	(1,400)	(4,000)	(4,230)
Total per State Comptroller's Records	\$ 84,285	\$ 131,442	\$ 138,737
 Federal Civil Preparedness Administration Fund - 497			
Federal Grants	\$ 412,926	\$ 0	\$ 0
Prior Year Refund	525	0	0
Total Cash Receipts per Department	413,451	0	0
Deposits in Transit to the State Comptroller			
Add: Beginning of Year	0	0	0
Less: Ending of Year	0	0	0
Total per State Comptroller's Records	\$ 413,451	\$ 0	\$ 0
 Health Facility Plan Review Fund - 524			
Certificate of Needs - Nursing Homes	\$ 357,401	\$ 302,377	\$ 308,734
Certificate of Needs - Hospitals	1,298,797	1,191,333	1,500,447
Prior Year Refund	0	21,559	22
Total Cash Receipts per Department	1,656,198	1,515,269	1,809,203
Deposits in Transit to the State Comptroller			
Add: Beginning of Year	71,758	21,659	16,235
Less: Ending of Year	(81,332)	(71,758)	(21,659)
Total per State Comptroller's Records	\$ 1,646,624	\$ 1,465,170	\$ 1,803,779
 Pesticide Control Fund - 576			
Fines and Fees	\$ 153,919	\$ 169,085	\$ 162,205
Deposits in Transit to the State Comptroller			
Add: Beginning of Year	4,060	1,150	1,500
Less: Ending of Year	(510)	(4,060)	(1,150)
Total per State Comptroller's Records	\$ 157,469	\$ 166,175	\$ 162,555

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
**COMPARATIVE SCHEDULE OF CASH RECEIPTS AND
RECONCILIATION OF CASH RECEIPTS TO DEPOSITS
REMITTED TO THE STATE COMPTROLLER**

For the Years Ended June 30,

	2005	2004	2003
Prostate Cancer Research Fund - 626			
Private Organizations or Individuals	\$ 25	\$ 0	\$ 0
Deposits in Transit to the State Comptroller			
Add: Beginning of Year	0	0	0
Less: Ending of Year	0	0	0
Total per State Comptroller's Records	\$ 25	\$ 0	\$ 0
 Death Certificate Surcharge Fund - 635			
Vital Records	\$ 1,817,810	\$ 1,916,196	\$ 1,850,810
Deposits in Transit to the State Comptroller			
Add: Beginning of Year	38,856	36,804	40,470
Less: Ending of Year	(17,966)	(38,856)	(36,804)
Total per State Comptroller's Records	\$ 1,838,700	\$ 1,914,144	\$ 1,854,476
 Illinois Adoption Registry and Medical Information Exchange Fund - 638			
Adoption Registry	\$ 1,280	\$ 1,600	\$ 680
Deposits in Transit to the State Comptroller			
Add: Beginning of Year	0	40	0
Less: Ending of Year	(80)	0	(40)
Total per State Comptroller's Records	\$ 1,200	\$ 1,640	\$ 640
 Assisted Living and Shared Housing Regulatory Fund - 702			
Licenses and Fees	\$ 85,035	\$ 59,075	\$ 52,035
Interest Income	1,990	1,234	1,092
Total Cash Receipts per Department	87,025	60,309	53,127
Interest collected by State Treasury	(1,990)	(1,234)	(1,092)
Deposits in Transit to the State Comptroller			
Add: Beginning of Year	3,840	845	720
Less: Ending of Year	(1,680)	(3,840)	(845)
Total per State Comptroller's Records	\$ 87,195	\$ 56,080	\$ 51,910

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
**COMPARATIVE SCHEDULE OF CASH RECEIPTS AND
RECONCILIATION OF CASH RECEIPTS TO DEPOSITS
REMITTED TO THE STATE COMPTROLLER**
For the Years Ended June 30,

	2005	2004	2003
Post Transplant Maintenance Fund - 712			
Interest Income	\$ 4,442	\$ 2,532	\$ 3,956
Interest collected by State Treasury	(4,442)	(2,532)	(3,956)
Deposits in Transit to the State Comptroller			
Add: Beginning of Year	0	0	0
Less: Ending of Year	0	0	0
Total per State Comptroller's Records	<u>\$ 0</u>	<u>\$ 0</u>	<u>\$ 0</u>
Tobacco Settlement Recovery Fund - 733			
Prior Year Refund	\$ 0	\$ 0	\$ 38,359
Deposits in Transit to the State Comptroller			
Add: Beginning of Year	0	0	0
Less: Ending of Year	0	0	0
Total per State Comptroller's Records	<u>\$ 0</u>	<u>\$ 0</u>	<u>\$ 38,359</u>
Public Health Federal Projects Fund - 838			
Federal Grants	\$ 173,948	\$ 199,500	\$ 150,473
Deposits in Transit to the State Comptroller			
Add: Beginning of Year	0	0	0
Less: Ending of Year	0	0	0
Total per State Comptroller's Records	<u>\$ 173,948</u>	<u>\$ 199,500</u>	<u>\$ 150,473</u>
Maternal and Child Health Services Block Grant Fund - 872			
Federal Grants	\$ 1,964,500	\$ 739,278	\$ 782,532
Prior Year Refund	0	16	0
Total Cash Receipts per Department	<u>1,964,500</u>	<u>739,294</u>	<u>782,532</u>
Deposits in Transit to the State Comptroller			
Add: Beginning of Year	0	0	7,448
Less: Ending of Year	0	0	0
Total per State Comptroller's Records	<u>\$ 1,964,500</u>	<u>\$ 739,294</u>	<u>\$ 789,980</u>

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
**COMPARATIVE SCHEDULE OF CASH RECEIPTS AND
RECONCILIATION OF CASH RECEIPTS TO DEPOSITS
REMITTED TO THE STATE COMPTROLLER**

For the Years Ended June 30,

	2005	2004	2003
Prevention Health and Health Services			
Block Grant Fund - 873			
Federal Grants	\$ 3,277,856	\$ 2,326,031	\$ 1,700,237
Deposits in Transit to the State Comptroller			
Add: Beginning of Year	0	0	0
Less: Ending of Year	0	0	0
Total per State Comptroller's Records	\$ 3,277,856	\$ 2,326,031	\$ 1,700,237
 Public Health Special State Projects Fund - 896			
State Agency Grants	\$ 70,692	\$ 268,740	\$ 264,119
Private Organizations or Individuals	189,201	149,735	182,820
Federal Government Indirect Cost Reimbursement	3,881,923	0	0
Prior Year Refund	0	105	1,556
Total Cash Receipts per Department	4,141,816	418,580	448,495
Deposits in Transit to the State Comptroller			
Add: Beginning of Year	2,860	3,383	700
Less: Ending of Year	(2,070)	(2,860)	(3,383)
Total per State Comptroller's Records	\$ 4,142,606	\$ 419,103	\$ 445,812
 Metabolic Screening and Treatment Fund - 920			
Laboratory Fees	\$ 8,298,501	\$ 8,737,077	\$ 6,388,550
Third Party Payees	221,872	128,993	87,091
Prior Year Refund	3,368	20,607	274
Total Cash Receipts per Department	8,523,741	8,886,677	6,475,915
Deposits in Transit to the State Comptroller			
Add: Beginning of Year	237,168	194,002	155,328
Less: Ending of Year	(53,202)	(237,168)	(194,002)
Total per State Comptroller's Records	\$ 8,707,707	\$ 8,843,511	\$ 6,437,241

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
**COMPARATIVE SCHEDULE OF CASH RECEIPTS AND
RECONCILIATION OF CASH RECEIPTS TO DEPOSITS
REMITTED TO THE STATE COMPTROLLER**

For the Years Ended June 30,

	2005	2004	2003
Hearing Instrument Dispenser Examining and Disiplinary Fund - 938			
Certify/Hearing Aid Dispense	\$ 29,185	\$ 42,734	\$ 74,055
Interest Income	6,096	3,701	5,857
Total Cash Receipts per Department	35,281	46,435	79,912
Interest collected by State Treasury	(6,096)	(3,701)	(5,857)
Deposits in Transit to the State Comptroller			
Add: Beginning of Year	1,680	1,285	4,065
Less: Ending of Year	(440)	(1,680)	(1,285)
Total per State Comptroller's Records	\$ 30,425	\$ 42,339	\$ 76,835
 Grand Total -All Funds			
Total Cash Receipts per Department	\$ 167,431,607	\$ 146,398,457	\$ 116,504,443
Interest collected by State Treasury	(77,361)	(38,609)	(76,414)
Deposits in Transit to the State Comptroller			
Add: Beginning of Year	1,058,313	535,017	633,212
Less: Ending of Year	(438,756)	(1,058,313)	(535,017)
Total per State Comptroller's Records	\$ 167,973,803	\$ 145,836,552	\$ 116,526,224

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
ANALYSIS OF SIGNIFICANT VARIATIONS IN EXPENDITURES
For the Two Years Ended June 30, 2005

ANALYSIS OF SIGNIFICANT VARIATIONS IN EXPENDITURES BETWEEN FISCAL YEARS 2004 AND 2005

Lou Gherig's Disease Research Fund - 061

The increase in expenditures was due to the Department receiving a FY05 appropriation to be used for grants to the Les Turner ALS Foundation for research on Amyotrophic Lateral Sclerosis.

Community Health Center Fund - 113

The amount of funds available for expenditures varies from one year to another depending upon receipts from student loan repayments. The Department collected additional funds in FY04 then in FY03 and as a result there was additional funds available in FY05 to spend on the Primary Health Care Services Program.

Emergency Public Health Fund - 240

Grants awarded to local health departments were reduced due to a limited cash balance in the emergency public health fund.

Long Term Care Monitor/Receiver Fund - 285

Expenditures increased due to the Department monitoring more nursing homes in FY05.

Public Health Services Revolving Fund - 340

The decrease in expenditures was due to federally funded HIV and STD commodities were purchased directly from federal funds in FY05. In FY04, these purchases were made directly from the revolving fund.

Regulatory Evaluation and Basic Enforcement Fund - 388

The increase in expenditures is due to the Department performing more Alternative Healthcare Facility services.

EMS Assistance Fund - 398

The decrease in expenditures is due to fewer EMS Assistance grants being paid out during FY05.

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
ANALYSIS OF SIGNIFICANT VARIATIONS IN EXPENDITURES
For the Two Years Ended June 30, 2005

ANALYSIS OF SIGNIFICANT VARIATIONS IN EXPENDITURES BETWEEN FISCAL YEARS 2004 AND 2005 (continued)

Federal Civil Preparedness Administrative Fund - 497

The increase in expenditures was due to the Department purchasing homeland security equipment in FY05.

Health Facility Plan Review Fund - 524

The increase in expenditures was due to an increase in payroll cost and temporary staff for the Health Facility Plan Review Program and Hospital Network System.

Pesticide Control Fund - 576

The increase in expenditures was due to an increase in payroll cost in FY05 for public education, research, and enforcement of the Structural Pest Control Act.

Prostate Cancer Research Fund - 626

The increase in expenditures was due to the Department awarding 2 grants to the University of Illinois in FY05 and only 1 grant in FY04.

Death Certificate Surcharge Fund - 635

The decrease in expenditures was due to Public Act 93-0445 suspending grants to allow implementation of a new electronic death certificate system.

Leukemia Treatment and Education Fund - 691

The increase in expenditures was due to the Department receiving a FY05 appropriation to be used for grants for the treatment of leukemia, lymphoma and myeloma.

Assisted Living and Shared Housing Regulatory Fund - 702

The increase in expenditures was due to an increased contractual staff needed to conduct delinquent Assisted Living surveys.

Asthma and Lung Research Fund - 713

The increase in expenditures was due to the Department receiving a FY05 appropriation to be used for a grant to the Asthma Clinical Research Program.

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
ANALYSIS OF SIGNIFICANT VARIATIONS IN EXPENDITURES
For the Two Years Ended June 30, 2005

ANALYSIS OF SIGNIFICANT VARIATIONS IN EXPENDITURES BETWEEN FISCAL YEARS 2004 AND 2005 (continued)

Spinal Cord Injury Paralysis Cure Research Trust Fund - 714

The increase in expenditures was due to the Department receiving a FY05 appropriation to be used for grants on spinal cord injury research.

Maternal and Child Health Services Block Fund - 872

The increase in expenditures was due to expenditures for grants to Perinatal Centers for premature and high-risk infants and their mothers. This program was transferred from the Department of Human Services to the Department of Public Health in FY05.

Preventive Health and Health Services Block Fund - 873

The increase in expenditures was due to the Department receiving additional funds for the Preventive Health and Health Services Program in FY05.

Public Health Special State Projects Fund - 896

The increase in expenditures was due to an increase in grant payments associated with Community Engagement efforts.

Metabolic Screening and Treatment Fund - 920

The increase in expenditures was due to the Department awarding additional grants due to the increased activity in the Metabolic Screening Follow-up Services Program. In addition, medical and food supplies provided also increased due to the increase in activity.

Illinois State Podiatric Discipline Fund - 954

Spending is dependant on the number of scholarships awarded, which is dependant on the number of qualified scholarship applicants. There were only two qualified applicants who were awarded scholarships in FY04 and only one in FY05.

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
ANALYSIS OF SIGNIFICANT VARIATIONS IN EXPENDITURES
For the Two Years Ended June 30, 2005

**ANALYSIS OF SIGNIFICANT VARIATIONS IN EXPENDITURES BETWEEN FISCAL
YEARS 2003 AND 2004**

Penny Severns Breast and Cervical Cancer Fund - 015

The increase is due to an increase in the number of breast and cervical cancer research grants awarded in FY04. The Department awarded eight grants in FY03 and ten grants in FY04.

Rural / Downstate Health Access Fund - 048

The decrease in this program is due to the change in the way the Department handled payments to the grant participants. In FY03, the local match was being deposited into this fund and then vouchering back to the participant. The Federal agency indicated the State did not need to receive the local funds; it only needed to confirm the required local participation. As a result, the Department discontinued receiving local funds and vouchering them back to participants in FY04.

Public Health Services Fund - 063

The increase in expenditures was due to an increase in the annualization and expansion of the Federal Bioterrorism Preparedness Grant. Another increase is due to a new contract in FY04 with the Illinois Department on Aging to expand ombudsman services for nursing home residents.

Community Health Center Fund - 113

The decrease in expenditures was due to the decrease in funding for Family Practice Residency Grants from FY03 to FY04. In FY03, Family Practice Residency Grants received \$210,000. In FY04, Family Practice Residency Grants received \$0. The cost matching system for this program changed from 50% Federal/ 25% State/ 25% local to 50% Federal/ 50% local, which reduced State expenditures.

Facility Licensing Fund - 118

The increase was due to new grants being awarded to local health departments for swimming pool investigations totaling \$25,000 in FY04. In addition, expenditures for personal services and fringe benefits increased in FY04 due to the Department allocating additional staff to licensing of facilities.

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
EXPLANATION OF SIGNIFICANT VARIATIONS IN EXPENDITURES
For the Two Years Ended June 30, 2005

ANALYSIS OF SIGNIFICANT VARIATIONS IN EXPENDITURES BETWEEN FISCAL YEARS 2003 AND 2004 (continued)

Emergency Public Health Fund - 240

The increase in expenditures was due to this fund being created in the FY04 budget for grants to local health departments for prevention and surveillance of the West Nile Virus.

Tanning Facility Permit Fund - 370

The decrease in expenditures was due to a decrease in personal services and fringe benefits due to FY03 early retirement staff not being replaced.

Federal Civil Preparedness Administrative Fund - 497

The increase in expenditures was due to new funding being made available in FY04 through Illinois Emergency Management Agency related to homeland security.

Health Facility Plan Review Fund - 524

The decrease in expenditures was due to Public Act 92-0563 eliminating certain fees, which reduced funds available for expenditures relating to the review of hospital projects.

Pesticide Control Fund - 576

The increase in expenditures was due to an increase in the average headcount relating to pest control that led to an increase in personal services and fringe benefits expenditures.

Prostate Cancer Research Fund - 626

The increase in expenditures was due to the Department receiving a FY04 appropriation to be used for grants to public and private entities in Illinois for prostate cancer research.

Death Certificate Surcharge Fund - 635

The increase in expenditures was due to the Department awarding grants to local county coroners and local registrars, paying staff salaries and fringe benefits, and paying CMS efficiency payments in FY04.

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
EXPLANATION OF SIGNIFICANT VARIATIONS IN EXPENDITURES
For the Two Years Ended June 30, 2005

**ANALYSIS OF SIGNIFICANT VARIATIONS IN EXPENDITURES BETWEEN FISCAL
YEARS 2003 AND 2004 (continued)**

Assisted Living and Shared Housing Regulatory Fund - 702

The increase in expenditures was due to the expansion of the Assisted Living Program, which led to an increased cost of survey staff.

Tobacco Settlement Recovery Fund - 733

The decrease in expenditures was due to a change in appropriation. The FY04 installment of a grant to the University of Chicago for Juvenile Diabetes Research was appropriated from the General Revenue Fund instead of from the Tobacco Settlement Recovery Fund. In addition, the Tobacco Prevention Media Campaign was eliminated in FY04.

Public Health Federal Projects Fund - 838

The increase in expenditures was due to a delay in receiving a grant from the Center for Disease Control for Epidemiological Studies, therefore an increase in contractual staffing was required in FY04 in order to award grants timely.

Public Health Special State Projects Fund - 896

The increase in expenditures was due to the Department purchasing additional medical supplies, vaccines, and laboratory supplies in FY04.

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
ANALYSIS OF SIGNIFICANT VARIATIONS IN RECEIPTS
For the Two Years Ended June 30, 2005

ANALYSIS OF SIGNIFICANT VARIATIONS IN RECEIPTS BETWEEN FISCAL YEARS 2004 AND 2005

General Revenue Fund - 001

The decrease in cash receipts in FY05 was due to the Budget Implementation Act (Public Act 93-0841) being amended, which allowed all long-term care licensure fees to be deposited into the Long-Term Care Monitor/Receiver Fund (285). In FY04 these fees were deposited into the General Revenue Fund. In addition, P.A. 93-0829, effective 7/28/04, authorized the Department to deposit federal indirect cost reimbursements into the Public Health Federal Projects Fund (896). These funds were previously deposited into the General Revenue Fund.

Community Health Center Care Fund - 113

The decrease in cash receipts in FY05 was due to a large loan repayment from a former medical student scholarship recipient in FY04.

Safe Bottled Water Fund - 115

The increase in cash receipts in FY05 was due to Public Act 93-0866, which created the Safe Bottled Water Fund and authorized the Department to issue permits to water bottling plants and private water source operators. The Act also authorized the Department to assess license fees of \$150, to be deposited into this new fund.

Illinois Health Facilities Planning Fund - 238

The increase in cash receipts in FY05 was due to a variation in fees charged for Certificates of Need, which are assessed based on the estimated cost of the project and range from \$700 to \$100,000. Also, the number of Applications for Exemption, which is a \$1,000 fee, increased from 56 in FY04 to 81 in FY05.

Public Health Water Permit Fund - 256

The decrease in cash receipts in FY05 was due to a decrease in the number of water well permits being requested from FY04 to FY05.

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
ANALYSIS OF SIGNIFICANT VARIATIONS IN RECEIPTS
For the Two Years Ended June 30, 2005

ANALYSIS OF SIGNIFICANT VARIATIONS IN RECEIPTS BETWEEN FISCAL YEARS 2004 AND 2005 (continued)

Long-Term Care Monitor/Receiver Fund - 285

The increase in cash receipts in FY05 was due to the Budget Implementation Act (Public Act 93-0841), which changed the annual licensure fee for long-term care facilities from a sliding scale fee to a flat fee of \$995 per facility. The Act also allowed all long-term care licensure fees to be deposited into this fund (previously the fees were deposited into GRF). In addition, there was an increase of fines assessed to nursing homes as a result of stricter enforcement of laws governing nursing homes.

Public Health Services Revolving Fund - 340

The decrease in cash receipts in FY05 was due to fewer funds being transferred into the fund for sexually transmitted disease testing.

Lead Poisoning, Screening, Prevention and Abatement Fund - 360

The decrease in cash receipts in FY05 was due to fewer fees billed to physicians in FY05. In addition, there were fewer children being tested in FY05 that were on medicaid.

Innovations in Long-Term Care - 371

The decrease in cash receipts in FY05 was due to a one-time transfer from the Public Health Services Fund (063) in FY04.

EMS Assistance Fund - 398

The decrease in cash receipts in FY05 was due to the Department postponing the testing of Emergency Medical Technicians in FY05.

Federal Civil Preparedness Administration Fund - 497

The increase in cash receipts in FY05 was due to the establishment of the fund in FY05 and the Department receiving federal grants relating to the Chemical Stockpile Emergency Preparedness Program and State and Local Homeland Security Exercise Support.

Assisted Living and Shared Housing Regulatory Fund - 702

The increase in cash receipts in FY05 was due to the Department receiving additional applications for new assisted living facilities and fines of current facilities increased during FY05.

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
ANALYSIS OF SIGNIFICANT VARIATIONS IN RECEIPTS
For the Two Years Ended June 30, 2005

ANALYSIS OF SIGNIFICANT VARIATIONS IN RECEIPTS BETWEEN FISCAL YEARS 2004 AND 2005 (continued)

Maternal and Child Health Services Block Grant Fund - 872

The increase in cash receipts in FY05 reflects the transfer of the funds for Grants to Hospitals for Perinatal Services from the Illinois Department of Human Services (DHS) back to the Department in FY05. The funds (and appropriations) were transferred from the Department to DHS under the Human Services Reorganization, but the Department retained administrative oversight of the program. The transfer of the funds (and appropriations) back to the Department in FY05 realigned the funds with the program administration.

Prevention Health and Health Services Block Grant Fund - 873

The increase in cash receipts in FY05 was due to the Rape Prevention and Education grant being issued to the Department instead of the Department of Human Services in FY05.

Public Health Special State Project Fund - 896

The increase in cash receipts in FY05 was due to Public Act 93-0829, effective 7/28/04, which authorized the Department to deposit indirect cost reimbursements into the Public Health Special State Projects Fund. These funds were previously deposited into the General Revenue Fund.

Hearing Instrument Dispenser Examining and Disciplinary Fund - 938

The decrease in cash receipts in FY05 was due to the license renewal process for audiologists. The Department's new licensing renewal process requires audiologists to renew their license every 2 years instead of every year and this new process became effective in FY04.

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
ANALYSIS OF SIGNIFICANT VARIATIONS IN RECEIPTS
For the Two Years Ended June 30, 2005

ANALYSIS OF SIGNIFICANT VARIATIONS IN RECEIPTS BETWEEN FISCAL YEARS 2003 AND 2004

Public Health Services Fund - 063

The increase in cash receipts in FY04 was due to variations in various federal grants received by the Division of Epidemiological Studies and the Center for Rural Health.

Community Health Center Care Fund - 113

The increase in cash receipts in FY04 was due to a large loan repayment from a former medical student scholarship recipient in FY04.

Illinois Health Care Cost Containment Special Studies Fund - 209

The decrease in cash receipts in FY04 was due to Public Act 92-0597 abolishing the Illinois Health Care Cost Containment Council (IHCCCC), effective 6/30/02. As a result, there were no revenues (which came from IHCCCC data charges) into the fund in FY04.

Long-Term Care Monitor/Receiver Fund - 285

The increase in cash receipts in FY04 was due to the FY04 Budget Implementation Act (Public Act 93-032). This Act increased the annual licensure fee for long-term care facilities from a flat rate of \$200 per facility to a sliding scale fee (starting at \$500), based on facility size. In addition, there was an increase of fines assessed to nursing homes as a result of stricter laws governing nursing homes.

Innovations in Long-Term Care Fund - 371

The increase in cash receipts in FY04 was due to a new fund authorized by Public Act 92-0784. Federal civil monetary penalties related to long-term care survey and certification program were deposited into this fund. In addition, the Department received a one-time transfer from the Public Health Services Fund (063) in FY04.

Regulatory Evaluation and Basic Enforcement Fund - 388

The decrease in cash receipts in FY04 was due to fewer facilities being qualified for licenses of this type of health care facility.

Tobacco Settlement Recovery Fund – 733

The decrease in cash receipts in FY04 was due to the Department receiving a one-time refund in FY03.

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
ANALYSIS OF SIGNIFICANT VARIATIONS IN RECEIPTS
For the Two Years Ended June 30, 2005

ANALYSIS OF SIGNIFICANT VARIATIONS IN RECEIPTS BETWEEN FISCAL YEARS 2003 AND 2004 (continued)

Public Health Federal Projects Fund - 838

The increase in cash receipts in FY04 was due to more federal funding received for the Pregnancy Risk Assessment Monitor System grant.

Prevention Health and Health Services Block Grant Fund - 873

The increase in cash receipts in FY04 was due to the Department receiving federal block grant funds and contracting with the Illinois Coalition Against Sexual Assault during FY04. This project was previously handled through the Department of Human Services.

Metabolic Screening and Treatment Fund - 920

The increase in cash receipts in FY04 was due to the newborn screening program. The number of metabolic/genetic conditions screened for in lab tests was expanded, effective 1/01/03, and the fee for these lab tests was increased from \$32 to \$47 per newborn. The increase in receipts in FY04 reflects a full 12 months of the new fee, compared to 6 months in FY03. In addition, there was an increase in the number of patients on Medicaid and a change in the Medicaid benefits calculation.

Hearing Instrument Dispenser Examining and Disciplinary Fund - 938

The decrease in cash receipts in FY04 was due to the license renewal process for audiologists. The Department's new licensing renewal process requires audiologists to renew their license every 2 years instead of every year and this new process became effective in FY04. As a result, FY03 cash receipts consisted of all licenses being renewed and any new licenses during the fiscal year and FY04 cash receipts consisted of any licenses that had expired in FY04 and needed to be renewed and any new licenses in the fiscal year.

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
ANALYSIS OF SIGNIFICANT LAPSE PERIOD SPENDING
For the Two Years Ended June 30, 2005

FISCAL YEAR 2005

Penny Severns Breast and Cervical Cancer Fund - 015

These grants are paid on a reimbursement basis. University grantees request reimbursement on a quarterly basis and the last quarter was paid during the lapse period.

Alzheimer's Disease Research Fund - 060

These grants are paid on a reimbursement basis and the requests for reimbursement were not received from grantees until the lapse period.

Public Health Water Permit Fund- 256

These grants are paid on a reimbursement basis. Grantees request reimbursement on a quarterly basis and the last quarter was paid during the lapse period.

Long-Term Care Monitor/Receiver Fund - 285

Invoices for monitoring fees were not received and paid until lapse. In addition, payments for travel occurring prior to the end of the year were made in the lapse period.

Public Health Services Revolving Fund - 340

These grants are paid on a reimbursement basis. Invoices from vendors for purchases made in May and June were not received until the lapse period.

Tanning Facility Permit Fund - 370

These grants are paid on a reimbursement basis. Grantees request reimbursement on a quarterly basis and the last quarter was paid during the lapse period.

Trauma Center Fund - 397

The annual allocation of revenues paid to trauma centers is based on trauma center data for the period from July through June. This data was not available until the lapse period.

EMS Assistance Fund - 398

Payments to the EMS Trauma System Hospitals were for Emergency Medical Technician exams that occurred at the end of the fiscal year.

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
ANALYSIS OF SIGNIFICANT LAPSE PERIOD SPENDING
For the Two Years Ended June 30, 2005

FISCAL YEAR 2005 (continued)

Federal Civil Preparedness Administrative Fund - 497

Payments were for homeland security equipment purchases that were not received until late June 2005.

Prostate Cancer Research Fund - 626

These grants are paid on a reimbursement basis and the requests for reimbursement were not received from grantees until the lapse period.

Spinal Cord Injury Paralysis Cure Research Fund - 714

The grantee selection process for this new appropriation was not finalized until the end of the fiscal year.

Tobacco Settlement Recovery Fund - 733

These grants are paid on a reimbursement basis and the requests for reimbursement were not received from grantees until the lapse period.

Maternal and Child Health Services Block Fund - 872

These grants are paid on a reimbursement basis. Requests for reimbursement were not received from perinatal centers until the lapse period. In addition, invoices for fluoridation materials were not received until the lapse period.

Preventive Health and Health Services Block Fund - 873

These grants are paid on a reimbursement basis and the requests for reimbursement were not received from grantees until the lapse period.

Public Health Special State Projects Fund - 896

Various Community Engagement grants were not finalized until the lapse period.

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
ANALYSIS OF SIGNIFICANT LAPSE PERIOD SPENDING
For the Two Years Ended June 30, 2005

FISCAL YEAR 2004

Penny Severns Breast and Cervical Cancer Fund - 015

These grants are paid on a reimbursement basis. University grantees request reimbursement on a quarterly basis and the last quarter was paid during the lapse period.

Alzheimer's Disease Research Fund - 060

These grants are paid on a reimbursement basis and the requests for reimbursement were not received from grantees until the lapse period.

Public Health Water Permit Fund - 256

These grants are paid on a reimbursement basis. Grantees request reimbursement on a quarterly basis and the last quarter was paid during the lapse period.

Tanning Facility Permit Fund - 370

These grants are paid on a reimbursement basis. Grantees request reimbursement on a quarterly basis and the last quarter was paid during the lapse period.

Trauma Center Fund - 397

The annual allocation of revenues paid to trauma centers is based on trauma center data for the period from July through June. This data was not available until the lapse period.

EMS Assistance Fund - 398

Awarding of numerous grants was delayed until June, causing grant payments to occur in July.

Federal Civil Preparedness Administrative Fund - 497

These payments were for employee's travel, tuition and fee reimbursements that occurred at the end of the fiscal year and payments could not be processed until the lapse period.

Prostate Cancer Research Fund - 626

These grants are paid on a reimbursement basis and the requests for reimbursement were not received from grantees until the lapse period.

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
ANALYSIS OF SIGNIFICANT LAPSE PERIOD SPENDING
For the Two Years Ended June 30, 2005

FISCAL YEAR 2004 (continued)

Assisted Living and Shared Housing Regulatory Fund - 702

June payroll, supplemental June payroll, June travel, and temporary help invoices were not received and processed until July.

Maternal and Child Health Services Block Fund - 872

These grants are paid on a reimbursement basis. Requests for reimbursement were not received from perinatal centers until the lapse period. In addition, invoices for fluoridation materials were not received until the lapse period.

Preventive Health and Health Services Block Fund - 873

These grants are paid on a reimbursement basis. Requests for reimbursement from grantees and vendors for perinatal services were not received from grantees until the lapse period.

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
ANALYSIS OF ACCOUNTS RECEIVABLE
For the Two Years Ended June 30, 2005
(expressed in thousands)

Aging of Accounts Receivable, per Department records, were as follows:

	2005	Fiscal Year 2004	2003
	<u>2005</u>	<u>2004</u>	<u>2003</u>
Current	\$ 4,671	\$ 4,026	\$ 22,100
1-30 days	123	183	201
31-90 days	139	113	103
91-180 days	53	26	116
181 days - 1 year	64	73	93
Over 1 year	<u>5,694</u>	<u>5,258</u>	<u>525</u>
Accounts Receivable Gross Balance	10,744	9,679	23,138
Less: Estimated Uncollectibles	<u>319</u>	<u>0</u>	<u>0</u>
Accounts Receivable Net Balance	<u>\$ 10,425</u>	<u>\$ 9,679</u>	<u>\$ 23,138</u>

NOTE: These amounts represent outstanding federal reimbursements, licenses and fees, fines and penalties, and loan repayments. The Department uses the Office of the Comptroller's offset system, the Office of the Attorney General and private collection services to collect overdue receivable balances.

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
SCHEDULE OF INDIRECT COST REIMBURSEMENTS
For the Two Years Ended June 30, 2005

The Department negotiates indirect cost reimbursement rates with the U.S. Department of Health and Human Services (DHHS). These indirect cost rates are used to support claims for indirect costs pertaining to grants and contracts with the federal government. The Department contracts the rate proposal and negotiation process to a professional consultant.

The rates are approved by DHHS in accordance with OMB Circular A-87, subject to any statutory or administrative limitations. Initially, provisional rates are determined and used. Final rates are eventually determined, generating possible over/under recovery of indirect costs, which are considered in finalizing future years' rates.

Cost base: Direct salaries and wages including fringe benefits exclusive of group insurance premiums.

	<u>FY05</u> (Fixed)	<u>FY04</u> (Fixed)
Costs Applicable to:		
Office of Epidemiology and Health Systems Development	37.0%	24.1%
Office of Health Promotion	18.4%	16.1%
Office of Health Care Regulation	26.3%	12.5%
Office of Health Protection (excluding Laboratories)	24.3%	16.4%
Office of Health Protection (Laboratories only)	12.9%	14.7%
Office of the Director - Center of Minority Health	18.4%	33.3%
Office of Women's Health	46.3%	22.7%
Office of Health Preparedness (Bioterrorism)	19.1%	--

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
ANALYSIS OF OPERATIONS
For the Two Years Ended June 30, 2005

AGENCY FUNCTIONS AND PLANNING PROGRAM

AGENCY FUNCTIONS

The mission of the Illinois Department of Public Health (Department) is to promote the health of the people of Illinois through the prevention and control of disease and injury. The Department, in partnership with local health departments and other agencies, employs population-based approaches in its prevention programs. The Department carries out its mission through six major program areas: Policy, Planning, and Statistics; Health Promotion; Health Care Regulation; Health Protection; Women's Health; and Preparedness and Response.

The Department is responsible for protecting the State's 12.4 million residents, as well as countless visitors, through the prevention and control of disease and injury. With more than 200 program components organized in nine offices, the Department provides and supports a broad range of services, including inspecting restaurants; vaccinating children to protect them against disease; testing to assure the safety of food, water, and drugs; licensing to ensure quality health care in hospitals and nursing homes; conducting investigations to control the outbreak of infectious diseases; collecting and evaluating health statistics to support prevention and regulatory programs; analyzing and shaping public policy; screening newborns for genetic diseases; and supporting local efforts to identify breast and cervical cancers in their early, more treatable stages. These programs touch virtually every age, aspect, and cycle of life.

The Department's budget recommendations continue to support the foundation of public health in Illinois, which is the network of local health departments and other community-based agencies delivering health services to individuals and protecting communities from disease and hazards. These and other Department-funded agencies will continue to work toward meeting the long-range goal of improving access to needed health services in targeted areas of the State, including rural areas, inner cities and suburban areas that are pockets of poverty.

PLANNING PROGRAMS

The Department's Director, Dr. Eric E. Whitaker, has established five strategic priorities that the Department uses as the basis of planning activities:

- Renew Community Engagement
- Enhance Preparedness for Bioterrorism and Emergency Events
- Reduce Disparities in Health Care and Status
- Strengthen the Public Health Infrastructure
- Improve Patient Safety

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
ANALYSIS OF OPERATIONS
For the Two Years Ended June 30, 2005

The Department is committed to five key initiatives related to these priorities:

- Assess Community Needs and Improve Community Ties, including outreach to minority communities
- Improve Illinois' capacity to manage complex/extreme situations related to Bioterrorism and Emergency Readiness
- Make public health information more accessible
- Address health disparities through funding for targeted areas
- Increase knowledge and skill sets of departmental staff to ensure continued provision of programs and services to the citizens of Illinois

Since early 1997, the Department has convened a multi-disciplinary state partnership and led a strategic planning effort to strengthen public health in Illinois. In March 2000, the partnership, Public Health Futures Illinois, published a plan entitled *Illinois Plan for Public Health Systems Change*. This plan established public health priorities for the State and a plan for system and performance monitoring. The partnership has evolved to become the Illinois Public Health Futures Institute (IPHFI). At the same time, the State Board of Health adopted a policy agenda that supports the development of a periodic, comprehensive, statewide plan for maintaining and improving the health of Illinois residents and improving public health system performance. The State Board of Health and IPHFI are the major statewide partners, along with the local health jurisdictions, in crafting the Department's strategic direction with respect to a public health infrastructure. The Department follows the recommendations of the *Illinois Plan for Public Health Systems Change* and it remains a focal point in the Department's priority of strengthening the public health infrastructure.

The Department has established a formal ongoing system for monitoring program performance. The program monitoring system comprises a variety of administrative and reporting systems that enable leadership in the Department to be knowledgeable about program implementation, problems and progress. This system facilitates early detection of problems in program performance and supports prompt administrative action.

A Planning Team appointed by the Director of the Department of Public Health has been charged to develop the State Health Improvement Plan (SHIP), recommending priorities and strategies to improve the Illinois public health system and Illinois residents' health status. The plan is to use national objectives and standards as frameworks; consider community and regional priorities and strategies and public and private sector contributions; address racial, ethnic, gender, age, socio-economic and geographic health disparities; and focus on prevention. The SHIP is expected to be completed by June 2006.

AUDITORS' ASSESSMENT OF AGENCY'S PLANNING PROGRAM

The planning program for the operation and administration of the Department consists of formal, written long-range goals and short-term objectives. The Department monitors program performance through a review of various administrative and reporting systems. These systems are reviewed and evaluated to determine whether or not alternative approaches need to be considered in order to meet the established goals and objectives of the programs.

The Department's planning function is adequate to fulfill the Department's statutory mandates.

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
ANALYSIS OF OPERATIONS
For the Two Years Ended June 30, 2005

AVERAGE NUMBER OF EMPLOYEES

The following table, prepared from Department records, presents the average number of employees, by function, for the Fiscal Year ended June 30,

<u>Division</u>	<u>2005</u>	<u>2004</u>	<u>2003</u>
Director's Office	63 (2)	40 (1)	60
Office of Finance and Administration (including Information Technology)	137 (2)	175	199
Office of Policy, Planning, and Statistics (formerly Office of Epidemiology and Health Systems Development)	76	69	71
Office of Health Promotion	65	72	73
Office of Health Care Regulation	319	312	350
Office of Health Protection (including Laboratories)	397	387	418
Office of Women's Health	19	21	16
Office of Preparedness and Response	42	44 (1)	0
Total average full-time employees	<u>1,118</u>	<u>1,120</u>	<u>1,187</u>

(1) Before the Department created the Office of Preparedness and Response in FY04, bioterrorism employees were previously part of the Director's Office.

(2) In FY05, regional operations staff was moved from the Office of Finance and Administration to the Director's Office.

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
ANALYSIS OF OPERATIONS
For the Two Years Ended June 30, 2005

EMERGENCY PURCHASES

The Department reported the following emergency purchases to the Office of the Auditor General during fiscal years 2005 and 2004.

<u>Date Filed</u>	<u>Description</u>	<u>Fiscal Year Cost</u>	
		<u>2005</u>	<u>2004</u>
3/24/2005	The Department needed to contract out the creation of a new Emergency Medical Technician (EMT) test because the existing tests were compromised. The Emergency Medical Services (EMS) Advisory Council could not create an adequate test bank in the time allowed.	\$ 48,000	
2/24/2005	Previous purchasing contract was canceled by the vendor because a new Td treatment was developed. As the supply of Td vaccine is also low, this contract is required to meet Illinois School requirements.	\$ 87,750	
6/3/2004	The Department provided mosquito larvicides to local communities for West Nile Virus mosquito abatement program after West Nile Cases had been discovered in 3 counties in 2004.		\$ 104,730
12/9/2003	The Department contracted to immediately broadcast a 30 second public service announcement 75 times over a 6 week period for people to protect themselves from West Nile Virus.		\$ 30,000
11/21/2003	The State is obligated to the City of Chicago to provide laboratory services for their city clinics. The State Public Health Laboratory does not have adequate staffing or equipment to provide this service. This is a bridge contract to provide one month laboratory services while a new contract is awarded.		\$ 40,000
		<u>\$ 135,750</u>	<u>\$ 174,730</u>

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
ANALYSIS OF OPERATIONS
For the Two Years Ended June 30, 2005

SERVICE EFFORTS AND ACCOMPLISHMENTS (not examined)

The Department of Public Health promotes health and safety and the prevention and control of disease and injury. General health and sanitation conditions in Illinois are monitored through department-established standards and regulations.

By providing grants to local health departments, the Department works to ensure the availability of basic preventive health care statewide and to reduce health disparities among minority and rural populations.

The Department licenses and inspects nursing homes and hospitals to reduce environment hazards, to examine conditions that cause illness or injury and to ensure quality care in these facilities.

Activities and Performance Indicators

<u>Health Protection</u>	<u>2005</u>	Fiscal Year <u>2004</u>	<u>2003</u>
Immunization Rate for children under 2 years of age, excluding Chicago	87.5%	87.5%	83.5%
Immunization Rate for all Illinois children under 2 years of age, including Chicago	86.4%	84.9%	80.4%
Percent of lead poisoning cases brought to resolution within 210 days	83.3%	94.0%	99.0%
Percent of non-community public water supplies with no coliform positive samples	99.4%	96.0%	99.0%
Number of lead poisoning cases remediated or referred for enforcement within 210 days	125	199	196
Total newborn screening test results reported	1,281,028	1,210,450	1,297,157
Turn-around time for positive newborn screening results (working days)	1.8	1.8	2.0
Number of prescriptions filled through AIDS Drug Assistance Program (ADAP)	126,233	111,248	107,560
Number of lead poisoning cases investigated	122	147	212
Total newborns screening tests performed	1,563,828	1,447,430	1,507,748
Number of all other tests performed	1,241,275	1,212,070	1,256,165

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
ANALYSIS OF OPERATIONS
For the Two Years Ended June 30, 2005

SERVICE EFFORTS AND ACCOMPLISHMENTS (not examined) (continued)

	Fiscal Year		
	<u>2005</u>	<u>2004</u>	<u>2003</u>
<u>Women's Health</u>			
Percent of women with abnormal screening results			
who received diagnostic follow-up	87.6%	84.2%	86.5%
Number of requests to Women's Health Helpline	1,603	2,936	2,461
Number of Women's Health Initiative and Osteoporosis Grant Awards	72	74	73
Women's Health Initiative and Osteoporosis Grant Awards (in thousands)	\$1,531.5	\$1,617.5	\$1,808.1
Number of women receiving screening services	17,567	20,508	15,876
Average turn-around time for requests received through the Women's Health Helpline (business days)	3.0	2.9	3.2
<u>Policy, Planning & Statistics</u>			
Number of Medicare certified rural health clinics	193	190	190
Number of hospitals certified as critical access hospitals	15	8	9
Number of medical scholarship recipients currently in practice in rural and underserved areas	120	119	114
Percentage of eligible hospitals obtaining critical access hospital certification	100%	100%	100% ¹
Number of hospitals receiving grants to assess potential impact of critical access hospital certification	18	13	15
Number of new medical scholarship awards	9	23	13
Number of continuing medical scholarship awards	50	52	49
Number of hospitals eligible for critical access hospital certification	13	13	35
<u>Health Care Regulation</u>			
Percent of hospital trauma centers in compliance with State regulations	100%	100%	97%
Percent of Long Term Care (LTC) facilities in compliance at annual inspection	37%	39%	37%
Percent of LTC facilities in compliance at first revisit of annuals	80%	88%	85%
Number of LTC facilities with a licensure Type "A" violation	96	91	74
Percent of LTC facilities with a licensure Type "A" violation	7.5%	7.0%	6.3%
Grants to Trauma Centers (in thousands)	\$4,936.5	\$4,600.5	\$4,700.0
Number of trauma cases	43,407	38,992	33,642

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
ANALYSIS OF OPERATIONS
For the Two Years Ended June 30, 2005

SERVICE EFFORTS AND ACCOMPLISHMENTS (not examined) (continued)

<u>Health Care Regulation (continued)</u>	Fiscal Year		
	<u>2005</u>	<u>2004</u>	<u>2003</u>
Number of EMS resource hospitals	62	62	62
Number of new Emergency Medical Technicians (EMT) licensed	*	4,265	3,609
Number of licensed LTC beds	125,349	126,363	120,531
Number of complaints received against LTC facilities	4,828	4,931	4,900
Number of LTC facility annual inspections	1,106	1,092	1,112
Number of LTC facility follow-ups to inspections	750	1,000	1,138 ²
Number of LTC State licensed facilities (as of July 1)	1,170	1,176	1,175
Number of hospitals designated as trauma centers	66	67	67
 <u>Health Promotion</u>			
Percentage of newborns screened	98%	*	99%
Number of infants confirmed with genetic/metabolic conditions	310	311	377
Number of children referred for lead follow-up exceeding 10 mcg/dl	9,843	13,130	16,653
Percentage of children tested with blood lead levels exceeding 10 mcg/dl	3.6%	4.9%	6.0%
Number of newborns screened for genetic/metabolic disorders	179,845	183,050	184,865
Number of children screened for blood lead poisoning	272,757	267,997	263,089
Number of vision and hearing screenings performed	1,799,125	2,534,319	2,555,000
Number of children targeted for lead screening	1,278,556	1,243,632	1,201,000
Number of children eligible for vision and hearing screening	1,400,000	1,485,000	1,300,000

* Statistic was not available at the time of the report

¹ - Statistic was restated from 75% in the prior report by the Department

² - Statistic was restated from 2,422 in the prior report by the Department