

TO JBC Members
FROM JBC Staff
DATE March 21, 2022

SUBJECT Figure Setting - Comeback Packet 9

Included in this packet are staff comeback memos for the following items:

LOC, page 1 (Andrea Uhl): Peace Officers Mental Health Support Reappropriated Funds (New, Technical Item)

DHS, page 3 (Tom Dermody): Diaper Distribution Program Line Item (New, *Technical Item*)

CDPHE, page 4 (Andrew Forbes): Cash Fund Waiver Requests (New Item)

Statewide, page 6 (Amanda Bickel): OSPB Request for \$100 Million General Fund Placeholder (New Item)

EDU, page 9 (Amanda Bickel): Imagination Library Roll-forward Footnote (New Item)

HED, page 12 (Amanda Bickel): Indirect Cost Collections Footnote ((New Item)

HED, page 13 (Amanda Bickel): Marijuana Support for Institute of Cannabis Research (New Item)

DORA, page 18 (Mitch Burmeister): BA1 Fee Relief for Licensed Nurses and Mental Health Professionals (*Tabled Item*)



TO Members of the Joint Budget Committee FROM Andrea Uhl JBC Staff (303-866-4956)

DATE March 18, 2022

SUBJECT DOLA Peace Officers Behavioral Health Support and Community Partnership

Grant Program - New Technical Issue

House Bill 17-1215 established the Peace Officers Mental Health Support Grant Program to provide grants to county sheriffs' offices and municipal police departments for the purpose of helping these agencies engage mental health professionals who can provide on-scene response services to support peace officers' handling of persons with mental health disorders and counseling services to peace officers. The Program has historically received an annual appropriation of \$2.0 million General Fund in the Long Bill to the Peace Officers Mental Health Support Fund, and a corresponding appropriation of \$2.0 million reappropriated funds out of the Fund.

House Bill 21-1030 expanded the Program to include behavioral health entities, county or district public health agencies, community-based social service and behavioral health providers, peace officer organizations, and public safety agencies, and updated the name to the Peace Officers Behavioral Health Support and Community Partnerships Grant Program. The bill also expanded the purposes for which grant money can be used and provided an additional \$1.0 million General Fund and reappropriated funds to the Program in FY 2021-22.

Since the Program's inception, and up until a few weeks ago, the State Controller had interpreted the statutory authority for the Program as de facto continuously appropriated. This was due to rare language that granted the Executive Director authority to expend money from the fund, with no mention of annual appropriation. However, H.B. 21-1030 altered that language, and Section 24-32-3501 (7)(a), C.R.S. now reads as follows:

(10) (7) (a) The peace officers mental BEHAVIORAL health support AND COMMUNITY PARTNERSHIP fund, referred to in this section as the "fund", is created in the state treasury. The fund consists of gifts, grants, and donations credited to the fund pursuant to subsection (10)(b) SUBSECTION (7)(b) of this section and any other money that the general assembly may appropriate or transfer to the fund. The executive director, or his or her designee SUBJECT TO ANNUAL APPROPRIATION BY THE GENERAL ASSEMBLY, THE DEPARTMENT may expend money from the fund for the purposes of this section. THE DEPARTMENT MAY USE UP TO FIVE PERCENT OF THE MONEY ANNUALLY APPROPRIATED TO THE FUND TO PAY THE DIRECT AND INDIRECT COSTS THAT THE DEPARTMENT INCURS IN ADMINISTERING THE GRANT PROGRAM.

The Department of Local Affairs was unaware of this change until recently and believes this was an unintended consequence of H.B. 21-1030. Now that the Peace Officers Behavioral Health Support and Community Partnership Fund is explicitly subject to annual appropriation, the Department will be unable to spend \$1.8 million in encumbered funds from FY 2019-20 and FY 2020-21

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appropriations as well as \$3.0 million from the FY 2021-22 Long Bill and H.B. 21-1030 appropriation after June 30, 2022. Grants for this program are typically made for a two-year period with extensions possible. Applications for the FY 2021-22 grants (the \$3.0 million appropriation) were due on January 28, 2022; the Department is delaying awards for this cycle until receiving clarity on this issue.

The Department has requested, and JBC staff recommends, a temporary solution to this problem by increasing the previously approved level of reappropriated funds in the Peace Officers Mental Health Support Grant Program line item from \$2.0 million to \$6.8 million. This would allow the Department to spend the General Funds that were appropriated to the "Appropriation to the Peace Officers Mental Health Support Fund" line in prior years. Staff and the Department agree that a permanent solution will be needed in the future; the Department is exploring options for statutory changes through S.B. 22-005 (Law Enforcement Agency Peace Officer Services), which makes additional changes to the Program.



TO Members of the Joint Budget Committee FROM Tom Dermody, JBC Staff (303-866-4963)

DATE March 17, 2022

SUBJECT Dept. of Human Services – Colorado Diaper Distribution Program line item

During Figure Setting for the Department of Human Services on February 23, 2022, staff neglected to create a new line item for the annualization of S.B. 21-027 (Emergency Supplies For Colorado Babies And Families). Senate Bill 21-027 created the Colorado Diaper Distribution Program in Section 26-2-140, C.R.S., and appropriated \$7.0 million total funds, including \$2.0 million General Fund and \$5.0 million cash funds from the Economic Recover and Relief Cash Fund created in section 24-75-228, C.R.S., and 1.9 FTE in FY 2021-22. The cost of the bill annualizes to \$2.0 million General Fund in FY 2022-23. Furthermore, the bill requires the Department to report on the Program during their SMART Act hearing beginning in FY 2022-23.

The annualization of S.B. 21-027 was captured in staff's Figure Setting summary tables for the Department (pgs. 4 and 8) and the Office of Self Sufficiency (pg. 76), as well as in Appendix A: Numbers Pages (pg. A-47). While the recommended and approved appropriation for the Department of Human Services reflects the annualization of S.B. 21-027, staff requests permission to create a new line item titled Colorado Diaper Distribution Program within the new (4) Office of Economic Security, (D) Food and Energy Assistance subdivision. This line item will house any future appropriations for the program.



To Joint Budget Committee

FROM Andrew Forbes, JBC Staff (303-866-2062)

DATE March 18, 2022

SUBJECT CDPHE Cash Fund Wavier Requests

The Department of Public Health and Environment has submitted cash fund wavier requests for the Home Care Agency Fund, the Radiation Control Fund, and the Assisted Living Residence Cash Fund.

HOME CARE AGENCY FUND

The Department requests a one-year waiver for the Home Care Agency Fund, which is projected to be in compliance with the 16.5 percent reserve requirement by the end of FY 2021-22. The fund receives fees for licensing and regulating home care agencies. The FY 2020-21 uncommitted fund balance was \$243,000 or 17.6 percent of FY 2020-21 expenditures, which was the second year in a row the fund was out of compliance. Even though the fund is expected to be in compliance during the current fiscal year, if projections are off, which is possible as revenues and expenditures swing by over \$100,000 annually this would limit the ability of the Department to expend money from the fund in FY 2022-23. Staff is recommending approval of the FY 2021-22 wavier.

ASSISTED LIVING RESIDENCE CASH FUND

The Department requests a one-year waiver for the Assisted Living Residence Cash Fund, which is projected to be in compliance with the 16.5 percent reserve requirement by the end of FY 2021-22. The Joint Budget Committee's budget actions to date includes a \$2.7 million General Fund appropriation to the Assisted Living Residence Cash fund in FY 2022-23 in order to waive the renewal fees that provide revenue to this fund. The fund receives fees for the costs of state licensing and regulation of assisted living facilities, including establishing minimum standards, conducting inspections, reviewing facility-reported occurrences and investigating complaints, and to provide technical assistance and education to assisted living residences. The FY 2020-21 uncommitted fund balance was \$677,000, or 22.6 percent of FY 2021-21 expenditures.

The fund is projected to be in compliance in FY 2021-22, but only just. The projected maximum reserve is calculated to be \$544,240 with the uncommitted balance coming in at \$544,073, leaving a \$167 room for error. Staff is recommending approval of the FY 2021-22 wavier, with an additional wavier for FY 2022-23 to account for the approved General Fund transfer

RADIATION CONTROL FUND

The Department requests a one-year waiver for the Radiation Control Fund for FY 2021-22, with the projected fund balance to equate to \$1.1 million, or 36.6 percent of current year expenditures. This would be the third year in a row the fund would exceed the 16.5 percent limit, impacting expenditures for FY 2022-23. The Department performed a fee review of the fund in April 2021, as they are required to do every two years, for July 2016 through June 2020. The review found that between Radioactive Materials fees and X-Ray Fees the fund averages a \$400,000 surplus annually.

Radiation Control Fund FY 2016-17 through FY 2019-20								
	TOTAL RADIOACTIVE MATERIALS TOTAL X-RAY TOTAL PROGRAM							
Average Revenue	\$2,198,863	\$817,982	3,016,845					
Average Expenditures	(1,922,012)	(685,483)	(2,607,494)					
Net	276,851	132,499	409,351					

The Department has the authority to set fees in order to align with expenditures, which is why the biannual fee review is in place, making it easier for the fund to comply with reserve requirements. During FY 2020-21, however, the Department was incorrectly booked for a \$488,334 accounts receivable asset. From the Controllers perspective this raises the amount of uncommitted reserves by the same amount. Staff is recommending a wavier for FY 2021-22 and FY 2022-23 to give the department time to fix the accounting error and in cooperate any necessary fee restructuring.



TO Members of the Joint Budget Committee FROM Amanda Bickel, JBC Staff (303-866-4960)

DATE March 18, 2022

SUBJECT Placeholder for General Fund for Matching Funds for federal Infrastructure and

Jobs Act

On March 2, the JBC voted to authorize a bill draft that would implement a Governor proposal to provide matching funds for federal Infrastructure Investment and Jobs Act". The Governor's proposal was to make \$100.0 million General Fund available for a variety of departments to use as matching funds when applying for federal grants. The Chair made the motion to proceed to draft but indicated that the dollar amount had not yet been decided.

Staff has had an initial discussion with the Governor's Office about the content of the bill. However, given some remaining uncertainty about the content, staff is currently recommending a placeholder--of whatever amount the JBC determines--so that the bill content can be finalized over the next couple of weeks and introduced separate from the Long Bill package.

A concept paper provided by OSPB indicates the following:

• There are about 200 programs included in the Infrastructure Investment and Jobs Act (IIJA) legislation that are expected to be relevant to Colorado. Though formula funding, Colorado is expected to receive approximately \$3.5 billion, but that could increase to \$7.0 billion if Colorado is successful in applying for competitive grants created through the legislation. For at least 40 percent of such grants, and possibly as much as 80 percent, non-federal match will be required. In many instances, the federal legislation is unclear on match requirements, so actual match requirements will be determined through administrative procedures. Funding opportunities and match requirements will be clarified over the next five years as programs are shaped and requests-for-proposals issued. The table below is OSPB's current estimate of the maximum match that may be required.

GROUP NAME	NATIONAL TOTAL	CO ESTIMATED ALLOCATIONS	ESTIMATED MATCH
Airports	\$25,000M	\$849M	\$149M
Broadband	65,000M	723M	114M
Electric Vehicles and Buses	14,975M	220M	27M
Environmental	20,998M	410M	0M
Grid Infrastructure and Resiliency	1,000M	17M	4M
Passenger and Freight Rail	53,900M	238M	42M
Ports/Waterways	16,204M	160M	0M
Power and Grid	73,557M	894M	114M
Public Transit	24,401M	247M	54M
Resiliency	19,612M	306M	12M
Roads, Bridges & Major Projects	109,576M	1,446M	331M
Safety & Research	9,981M	149M	24M
Water Infrastructure	61,626M	1,538M	98M

GROUP NAME	NATIONAL TOTAL	CO Estimated	ESTIMATED MATCH
		ALLOCATIONS	
Grand Total	\$495,829M	\$7,196M	\$971M

• OSPB's request for \$100 million in matching funds represents 10.0 percent of the maximum match anticipated to be required. OSPB notes that about 1/3rd of the funding will be allocated to state agencies, with the balance going to local or regional jurisdictions, higher education institutions, or individual nonprofits or firms. It also presumes that significant matching funds will be provided within existing appropriations.

OSPB's **Initial Concept** for the legislation is described as follows:

- Legislative **transfer of \$100M General Fund** into the newly created Infrastructure Project Matching Cash Fund, then subsequently appropriate these funds to the Governor's Office, with the ability to transfer the funds to any department upon approval from the Governor's Office.
- Legislation to state that appropriations from the **fund shall remain available through the five- year IIJA period.** This reflects a realistic expectation of the match expenditure timeline, given that IIJA investments are to be allocated and granted over the next five years.
- **Use of Funds:** Funds shall be eligible to serve as matching funds and/or administrative funds for programs created by IIJA legislation, as allowed for these uses unless modified by federal guidance. Recommended statute would include the intent that funds are broadly allocated in the following proportion:
 - Transportation Programs: 35%
 - Water, Environmental, Resiliency Programs: 20%
 - O Power, Grid, Broadband Programs: 25%
 - O Local match support: 15% (priority to small and/or rural jurisdictions, using tools such as a rural capacity index as a guide, may include amounts for local planning, administration and oversight)
 - State support for grant-writing, oversight, and project planning: 5%
- Limited Transfer Authority Between Categories: Because of the uncertainty related to funding needs, OSPB is seeking a balance between legislative direction and flexibility. Based on discussion with JBC and OLLS Staff, options might include creating subaccounts for specific purposes but giving legislative authority to make some transfers among these categories, with larger transfer authority potentially provided based on requests submitted to the JBC and JBC action.
- Tracking and Reporting of Fund Obligation:
 - Agencies would submit requests as needed to the Governor's Office to commit a portion of the \$100M for any one project or grant application
 - o Recommended to include in statute:

- OSPB shall be responsible for tracking the amount of dollars requested by agencies to meet infrastructure match requirements and subsequently approved by the Governor's Office to be resourced through this new cash fund.
- Once a federal agency approves a state agency's grant application which includes the use of matching funds from this cash fund, the implementing state agency shall earmark these funds in the state's financial system (via entering a distinct budget line item in CORE) and shall encumber the matching funds as obligations are entered into with the earmarked funds.
- The Governor's Office shall provide periodic reports to the Joint Budget Committee on the use of the fund including the amount of funds that have been committed, encumbered, and expended.



TO Members of the Joint Budget Committee FROM Amanda Bickel, JBC Staff (303-866-4960)

DATE March 21, 2022

SUBJECT Imagination Library Roll Forward

COMMITTEE OPTION: Staff is bringing this item to the Committee at the request of Senator Zenzinger. Representatives for the Imagination Library have indicated that the program will underexpend its FY 2021-22 appropriation due to various administrative delays. One concern expressed by the program is that, by law, the share of funds that may be spent on administration drops in FY 2022-23 from 20.0 percent to 10.0 percent and this may be insufficient to cover administrative expenses in FY 2022-23. The program seeks the ability to roll-forward the balance of any money not spent in FY 2021-22 into FY 2022-23. If the Committee wishes to authorize this, it would need to authorize an add-on Long Bill supplemental that brings in the related FY 2021-22 appropriation in last year's School Finance Act and adds language authorizing unspent amounts to be rolled forward. The format is slightly different from a footnote but has the same effect. The provision would amend Section 42 of S.B. 21-268 (Public School Finance), which provided the FY 2021-22 appropriation for this program.

SECTION 42. Appropriation. For the 2021-22 state fiscal year, \$410,221 is appropriated to the department of education. This appropriation is from the general fund. To implement this act, the department may use this appropriation for the Colorado imagination library program. Any money appropriated in this section not expended prior to July 1, 2022, is further appropriated to the department for the DEPARTMENT FOR THE 2022-23 STATE FISCAL YEAR FOR THE SAME PURPOSE.

ADDITIONAL BACKGROUND: Senate Bill 20-185 created the Colorado Imagination Library Program to provide books free of charge to children under the age of five years. The bill required the State Librarian to contract with a nonprofit organization to operate the program and would require the contractor to:

- Create and operate the program, including establishing county affiliate programs in all Colorado counties.
- Manage daily operations of the program.
- Develop, promote, and coordinate a public awareness campaign.
- Contract with a national nonprofit (such as the Dolly Parton Imagination Library) to provide high-quality, age-appropriate books to eligible children.

The bill made the requirements subject to available appropriations. However, it did not provide state funding for the program for FY 2020-21. Although the bill authorized the Department to accept gifts, grants, or donations for the program, it did not receive such external support in FY 2020-21 and therefore did not establish the program.

For FY 2021-22, S.B. 21-268 (Public School Finance) made statutory adjustments to the program. These included the following changes.

- The bill eliminated language that made contracting for the program "subject to available appropriation". Instead, the bill requires the General Assembly to annually appropriate General Fund for the state's share of the cost of providing books. It requires the General Assembly to appropriate \$907,140 General Fund for the program in FY 2022-23, and requires the General Assembly to increase the appropriation in subsequent years as necessary to meet the intention of providing full funding by 2026 for any child who wishes to participate.
- It requires that the State Librarian enter into a contract with a nonprofit organization to operate the program by December 31, 2021.
- It requires the contractor's public awareness campaign coordinate with the public awareness campaign for the READ Act.
- It requires the contractor provide for a high-quality independent evaluation of child and family outcomes from the program.
- It establishes a distressed affiliate fund using gifts, grants, and donations to assist programs that have difficulty meeting county-based funding requirements.
- It specifies that twenty percent of funds appropriated for FY 2021-22 and ten percent of money appropriated for FY 2022-23 and thereafter may be used for the contractor operating the program for specified administrative and other duties, including providing for the program evaluation.

Senate Bill 21-268 provided an appropriation of \$440,210 General Fund, and the fiscal note for the bill indicated that this amount would increase by \$496,919 General Fund to \$907,140 General Fund for FY 2022-23.

The Committee approved an appropriation of \$907,140 General Fund for FY 2022-23 for the Imagination Library. This aligns with amount required by statute for FY 2022-23 under the provisions of S.B. 21-268.



TO Members of the Joint Budget Committee FROM Amanda Bickel, JBC Staff (303-866-4960)

DATE March 18 2022

SUBJECT Higher Education Footnote Recommended on Indirect Cost Collections

During figure setting for the Department of Higher Education, staff recommended that the Department make internal accounting changes to eliminate a double-count of TABOR revenue related to indirect cost collections. The Department has indicated that this is feasible, and the Committee voted to approve this. To clarify the Committee's intent, staff recommends the addition of the following footnote.

No Department of Higher Education, Colorado Commission on Higher Education and Higher Education Special Purpose Programs, Indirect Cost Assessments -- It is the General Assembly's intent that the Department of Higher Education adjusts its accounting procedures for indirect cost collections from institutions of higher education so that reappropriated funds in this line item for indirect cost assessments are deducted from fee-for-service contract and grant amounts that are otherwise payable to institutions of higher education. The intent of this change is to eliminate a double-count of revenue under which the Department disburses funds to the institutions and then counts indirect cost assessments received from the institutions as revenue to the State's TABOR district. This change is expected to enable the State to retain an additional \$7,321,029 in General Fund revenue under the State's Referendum C cap.



TO Members of the Joint Budget Committee FROM Amanda Bickel, JBC Staff (303-866-4960)

DATE March 21, 2022

SUBJECT Institute of Cannabis Research Funding

During figure setting for the Department of Higher Education, Staff recommended that the JBC approve an increase of \$1,000,000 for the Institute of Cannabis Research, rather than the \$1,800,000 requested, pending additional information about Marijuana Tax Cash Fund (MTCF) revenue available and the implications of increasing base funding. Currently, the ICR receives \$1.8 million from the MTCF, so the request was to double the appropriation. The Committee approved the staff recommendation. The following memo will enable the Committee to revisit its decision on funding for the Institute for Cannabis Research, if desired, once it has made other decisions related to the MTCF, including deciding upon which forecast to use and deciding whether and how it might adjust MTCF transfers required to the Public School Capital Construction Assistance Fund.

During the March 15, 2022 Marijuana Tax Cash Fund updated provided by staff (https://leg.colorado.gov/sites/default/files/fy2022-23 marfig.pdf) Mr. Harper provided the following table indicating that appropriations from the MTCF appear to be sustainable.

TABLE 2 – ANNUAL MARIJUANA TAX CASH FUND REVENUES (DECEMBER 2021 LCS REVENUE FORECAST) VS. CURRENTLY APPROVED APPROPRIATIONS					
FY 2021-22 FY 2022-23					
Annual "New" Revenues	\$173,288,882	\$181,086,881			
Appropriations (Current Law for FY 2021-22 and Approved for FY 2022-23)	151,169,362	157,807,312			
Revenue Above/(Below) Appropriation	\$22,119,520	\$23,279,569			

Mr. Harper also noted that the MTCF does <u>not</u> appear able to support all of its existing requirements for FY 2021-22, including transfers to the Public School Capital Construction Fund. Related to this, he recommended that the Committee sponsor legislation, consistent with the Executive Request, to move approximately \$55.0 million of a \$100.0 million transfer to the Public School Capital from FY 2021-22 into later years. Depending upon how required FY 2021-22 transfers are spread to later years, it could eliminate most or all of the \$23.3 million in revenue anticipated to be available for ongoing expenses in FY 2022-23.

R8 COLORADO CANNABIS RESEARCH FUNDING FOR INSTITUTE OF CANNABIS RESEARCH

REQUEST: The Department request includes an increase \$1,800,000 from the Marijuana Tax Cash Fund (MTCF) for the Institute of Cannabis Research. This amount would double the current appropriation for the Institute, bringing it to \$3,600,000.

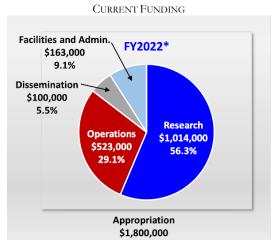
RECOMMENDATION:

- Staff recommends that the Committee increase funding for the Institute by \$1,000,000 cash funds from the MTCF, to a total of \$2,800,000, pending updated projections on revenue to the Marijuana Tax Cash Fund and staff's analysis of the revenue required to maintain programs to which the State has previously committed. Staff recommends all funding be included in a line item entitled "Institute of Cannabis Research".
- Staff is supportive of increasing research funding for the Institute of Cannabis Research. However, given questions about available MTCF revenue, staff recommends that the Committee consider whether additional funding for the Institute, beyond the \$1.0 million recommended, is feasible after the March 15 discussion on the Marijuana Tax Cash Fund and the March 17 revenue forecast.
- Staff also recommends continuing a footnote authorizing the Institute to roll forward up to \$500,000 of the total appropriation to FY 2022-23, representing approximately one quarter of research funding.
- While there has been some discussion of a bill related to the Institute of Cannabis Research, if roll-forward authority is the primary reason for such a bill, staff recommends that, for now, this issue be addressed by continuing to allow the organization some roll-forward authority through the Long Bill. Staff notes that OSPB has expressed objection to allowing any roll-forward, but given the function of this funding-research grants that may in some cases require timing adjustments--staff believes limited roll-forward authority is appropriate. By providing authorization through the Long Bill, rather than statute, the JBC will also be in a better position to determine whether/when this authority should be adjusted.

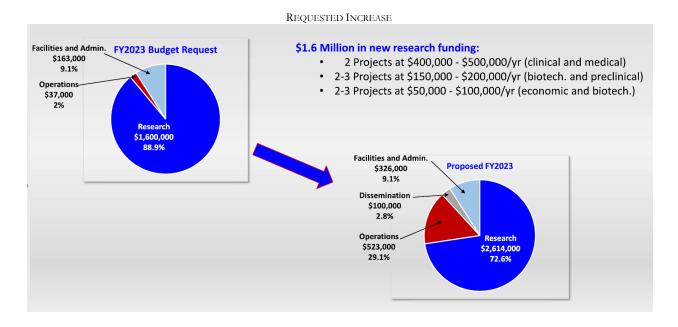
ANALYSIS:

Background: Senate Bill 16-191 authorized the General Assembly to appropriate money from the Marijuana Tax Cash Fund (MTCF) to the Board of Governors of the Colorado State University System (CSU) to fund scientific and social science research at CSU-Pueblo concerning marijuana and other matters that impact the state and its regions. The appropriation was initially provided at the \$900,000 level and was increased to \$1,800,000 MTCF in FY 2017-18. House Bill 19-1311 (Institute of Cannabis Research Role and Mission by Singer/Bridges made changes to the program. The changes include, among others, creating a new 9-member board to oversee the program, approve the budget, and oversee grant awards through an open process. Prior to 2019, the Institute's activities were focused on research and education at CSU Pueblo and hosting an annual research conference. In 2019, the mission evolved to a pure research focus engaging researchers throughout Colorado. One intent of this structural change was to make the Institute more independent of CSU-Pueblo and thereby clarify a statewide mission, even though the institute remains housed at CSU Pueblo.

During the 2020 legislative session, in response to budget constraints, the JBC reduced the budget for the Institute to \$1,000,000 cash funds from the MTCF for FY 2020-21. Staff anticipated that this would eliminate much of the state funding for institute-sponsored research, while leaving the core institute structure and staffing in place. The FY 2020-21 reduction was restored in FY 2021-22 to \$1,800,000. In its hearing responses, the Institute provided the following graphics indicating how funds are used in FY 2021-22 (based on its Board-approved budget) and how it would hopes to direct the \$1,600,000 requested.



*Board-approved budget



As shown, the proposal includes:

- Increasing research funding by \$1,400,00, including adding new clinical/medical multi-year projects, new biotechnology/scientific multi-year projects, and two economic-social impact multi-year projects.
- Increasing administration funding by \$200,000. In response to staff questions, the Institute reports that this would be primarily to cover a 10 percent facilities and administration overhead charge for Colorado State University of Pueblo for space, accounting, business, human resources, contracting, legal services, and other administrative support. A recent analysis had indicated that the current facilities and administration payment (\$163,000) covers less than half of CSU-Pueblo's costs.

The ICR's current grant funding model launched in 2021 and is based on the process used by the National Institutes of Health for research funding. There is significant demand for this research funding, and the request notes that unbiased research on cannabis informs appropriate regulation and policy to protect public health and safety; stimulates medical, scientific, and technology advancement; and addresses societal questions about the impacts of new markets and policies. The ICR also continues to host an annual research conference, sponsors publication of the Journal of Cannabis Research in partnership with Springer Nature Publishing, and provides a monthly webinar series on cannabis research. Studies have explored issues such as the effects of medicinal cannabinoids on seizures in those with epilepsy, a study of use of industrial hemp fibers as reinforcing agents, and study for an enhanced method for extracting cannabinol from cannabis leaves and flowers using pressurized liquid extraction. As the new funds have been requested, budgets for operations and dissemination activities (journal and conference) would be unchanged, while the research budget would increase to \$2.6 million.

Staff Observations

- Given marijuana tax revenues in the \$425 million range, a total of the requested \$3.6 million from this funding source for the institute and state-funded research on cannabis seems relatively modest. The Institute has noted that funding for research on cannabis is constrained by the federal prohibition on use and sale of cannabis. It also notes that private funding is heavily driven by the existing structure of financial incentives. Thus, pharmaceutical companies have thus far shown little public interest in funding research in this area as cannabis is already legally available and thus less likely to be profitable, and businesses that grow and sell marijuana for medicinal and recreational purposes are particularly interested in research and findings that bolster their bottom line.
- Members of the General Assembly have expressed interest in improving information on Marijuana that is being sold for medical and recreational uses, including improving the information on the dosage dispensed, and related health and medical impacts. The institute is well-positioned to deliver this.
- The changes adopted by the Institute to mirror National Institute of Health approaches to grant funding seem reasonable and appropriate, and the Board of the Institute appears to be doing its intended job.
- Given the points above, staff is supportive of an increase in funding for the Institute. However, staff also notes that the flow of marijuana tax revenue is less secure than in the past. As outline in the Staff budget briefing on the marijuana revenue outlook¹, marijuana revenue projections have decreased since the General Assembly finalized the FY 2021-22 budget. Prior to FY 2020-21, the General Assembly relied on prior year revenue to support spending for the upcoming budget year. However, that changed in FY 2020-21. Thus, as revenue has declined, the State's ability to fund its FY 2021-22 commitments is in question. Given this, staff is not

¹ https://leg.colorado.gov/sites/default/files/fy2022-23 marbrf.pdf

recommending the full request, pending the results of the March discussions of marijuana appropriations approved by the IBC and the revenue forecast.

- Regardless of the size of increase available, staff recommends continuing to allow roll-forward of approximately 25 percent of research funding. Beginning in FY 2021-22, the General Assembly included a roll-forward of approximately 25 percent of research funding (\$250,000). Staff proposes to continue this in FY 2022-23, with the size of roll-forward dependent upon the amount of funding authorized. The institute had noted that it routinely faced a technical problem with spending for research, because research projects often extend beyond a year or may be temporarily delayed by any number of intervening factors. It had also noted that the federal National Institutes of Health allows roll-forward of up to 25.0 percent of research grants with little additional inquiry, and that it would be helpful to have a similar policy for state funding for research from the institute. While OSPB has objected to a roll-forward, the additional flexibility seems appropriate to staff.
- Further, staff recommends re-consolidating the line item for the Institute of Cannabis Research, which was split in FY 2021-22 between two lines, including one for the Board of the Institute and one directed to CSU-Pueblo. Although the program had believed this change would simplify accounting, it has made accounting more challenging. Given this, staff is recommending just one line item entitled "Institute of Cannabis Research at CSU Pueblo".



TO Members of the Joint Budget Committee FROM Mitch Burmeister, JBC Staff (303-866-3147)

DATE March 18, 2022

SUBJECT JBC staff Comeback for the Department of Regulatory Agencies – BA1

→ BA1 FEE RELIEF FOR LICENSED NURSES AND MENTAL HEALTH PROFESSIONALS

REQUEST: The Department requests an increase of \$14,070,140 General Fund for FY 2022-23 to subsidize license renewal fees for nursing and mental health professionals. This amount would be spread over two years because of the cyclical nature of license renewal.

RECOMMENDATION: Staff recommends denial of the request. Fees are collected to support specific programs or activities, and using General Fund to subsidize those activities is not an appropriate use of tax dollars.

UPDATED ANALYSIS:

There are currently two bills (H.B. 22-1298 and H.B. 22-1299) that have been introduced that would accomplish the goals of this request if signed by the Governor. The total amount that they would transfer from the General Fund to the Division of Professions and Occupations (DPO) is \$15,418,864. This would reduce the fees for select occupations and professions for one renewal cycle to \$0. The following table details the boards and actual expenditures encompassed by the two bills.

Boards								
	FY 19-20	FY 20-21	2-YEAR TOTAL					
Mental Health Board								
Marriage and Family Therapists	\$94,328	\$92,941	\$187,270					
Professional Counselors	586,126	565,357	1,151,483					
Psychologists	274,479	342,003	616,482					
Social Workers	359,006	336,065	695,071					
Unlicensed Pyschotherapists	343,996	340,810	684,806					
Nursing Board								
Nurse Aides	1,482,738	1,598,178	3,080,916					
Nurses	4,890,772	4,596,307	9,487,079					
Addiction Counselors	319,153	369,309	688,462					
TOTAL	\$8,350,598	\$8,240,969	\$16,591,567					

Alternately, staff provided the following tables to the Committee on March 16. These tables provide actual expenditure amounts for all boards within DPO, as well as a selection of expenditures from boards related to healthcare. Staff believes that the second table provides a good estimate of how much General Fund the Committee would need to dedicate to the DPO Cash Fund if it wanted to reduce fees for *all* healthcare professionals for their next renewal cycle. The reason that the table encompasses two years of actual expenditures is because many healthcare professionals renew licenses and registrations on a two-year cycle.

Total Expenditure of DPO Boards						
Board	FY 19-20	FY 20-21	2-YEAR TOTAL			
Accountancy Board	\$554,660	\$529,113	\$1,083,773			
Acupuncturist Board	65,470	70,440	135,910			
Addiction Counselors	319,153	369,309	688,462			
Architects, Engineers & Land Surveyors Board	1,333,076	1,215,377	2,548,453			
Athletic Trainers Board	47,067	17,396	64,463			
Barber & Cosmetologists Board	1,158,369	1,395,601	2,553,970			
Chiropractic Board	333,487	267,949	601,437			
Colorado Medical Board	3,780,813	3,271,189	7,052,002			
Dental Board	1,059,645	1,040,441	2,100,086			
Direct Entry Midwives Board	55,392	39,901	95,293			
Electrical Board	5,238,267	5,350,199	10,588,466			
Funeral Homes And Crematories	58,253	53,471	111,724			
Hearing Aid Providers	30,328	16,606	46,935			
Landscape Architects Board	156,449	140,356	296,805			
Mental Health Board	1,657,935	1,677,176	3,335,111			
Message Therapists Board	808,016	635,410	1,443,426			
Nursing Board	6,373,510	6,194,485	12,567,995			
Nursing Home Administrators Board	116,248	109,362	225,610			
Occupational Therapists Board	122,411	120,417	242,828			
Office Of Audiologists	37,197	38,661	75,859			
Office Of Boxing	133,912	120,140	254,052			
Office Of Fantasy Contests Operators	31,369	4,246	35,615			
Office Of Naturopathic Doctors	49,784	52,081	101,865			
Optometrists Board	140,755	118,165	258,920			
Outfitters Board	151,478	118,527	270,005			
Passenger Tramway Safety Board	612,275	561,450	1,173,725			
Pharmacy Board	2,399,976	2,899,476	5,299,451			
Physical Therapy Board	384,799	305,515	690,314			
Plumbers Board	2,168,037	2,184,310	4,352,347			
Podiatry Board	153,858	72,223	226,080			
Private Investigator Board	49,227	25,885	75,111			
Respiratory Therapists Board	86,199	94,850	181,049			
Speech Language Pathologists Board	72,429	68,436	140,865			
Surgical Assistant & Technologists Board	138,836	68,368	207,204			
Veterinary Medicine Board	315,906	308,489	624,394			
TOTAL	\$30,194,587	\$29,555,018	\$59,749,605			

Necessary Funding Estimated to Eliminate Fees							
Board	FY 19-20	FY 20-21	2-YEAR TOTAL				
Acupuncturist Board	\$65,470	\$70,440	\$135,910				
Addiction Counselors	319,153	369,309	688,462				
Athletic Trainers Board	47,067	17,396	64,463				
Chiropractic Board	333,487	267,949	601,437				
Colorado Medical Board	3,780,813	3,271,189	7,052,002				
Dental Board	1,059,645	1,040,441	2,100,086				
Direct Entry Midwives Board	55,392	39,901	95,293				
Hearing Aid Providers	30,328	16,606	46,935				
Mental Health Board	1,657,935	1,677,176	3,335,111				
Message Therapists Board	808,016	635,410	1,443,426				
Nursing Board	6,373,510	6,194,485	12,567,995				
Nursing Home Administrators Board	116,248	109,362	225,610				
Occupational Therapists Board	122,411	120,417	242,828				

Necessary Funding Estimated to Eliminate Fees						
Board	FY 19-20	FY 20-21	2-YEAR TOTAL			
Office Of Audiologists	37,197	38,661	75,859			
Optometrists Board	140,755	118,165	258,920			
Pharmacy Board	2,399,976	2,899,476	5,299,451			
Physical Therapy Board	384,799	305,515	690,314			
Podiatry Board	153,858	72,223	226,080			
Respiratory Therapists Board	86,199	94,850	181,049			
Speech Language Pathologists Board	72,429	68,436	140,865			
Surgical Assistant & Technologists Board	138,836	68,368	207,204			
TOTAL	\$18,183,525	\$17,495,774	\$35,679,299			

While these tables estimate an 'upper limit' on how much could be transferred to the DPO Cash Fund, staff believes there are many questions regarding which fees could or should be eliminated.

After speaking with the Department and OSPB, staff learned that the decision on which fees were chosen for subsidies was based on a national study by Mercer. The whitepaper for that study is attached to this memo.

Essentially, the whitepaper estimates that by 2026, Colorado will have roughly 54,000 fewer low-wage healthcare workers such as medical assistants, home health aides, and nursing assistants. It is also estimated that there will be approximately 10,000 fewer registered nurses and around 4,400 fewer mental health professionals.

Staff also found data from the Bureau of Labor Statistics on total employees, hourly rates, and annual salaries for many healthcare-related professions in Colorado. Staff has prepared some of these data for the Committee. While these data can be helpful in understanding some of the shifts in the healthcare labor market in Colorado over the last five years, the key piece of missing data is the cost per license/registration renewal. This is difficult to determine, because each profession is overseen by a different board, and the fees depend on how much it costs in a given year to operate that board.

While some General Fund subsidies could target certain professions, staff is not optimistic for a large impact on the workforce from fee relief alone. Taken together with other measures, an argument might be able to be made for attracting new workers to a profession, but in isolation, it is unlikely that this relief would do much to bring more employees to these positions.

Total Employment

JOB TITLE	2016	2017	2018	2019	2020	% Change
Anesthesiologists	280	540	530	610	520	85.71
Athletic Trainers	390	450	430	490	360	(7.69)
Audiologists	290	290	**	**	**	
Cardiovascular Technologists and Technicians	550	610	670	670	680	23.64
Chiropractors	970	980	970	860	720	(25.77)
Clinical Laboratory Technologists and Technicians	4,620	4,650	4,680	4,960	4,920	6.49
Dental Assistants	6,690	7,080	7,910	8,390	8,390	25.41
Dental Hygienists	4,580	4,900	4,470	4,190	3,650	(20.31)
Dentists, General	2,020	1,930	2,330	2,280	1,840	(8.91)
Diagnostic Medical Sonographers	880	1,040	1,160	1,260	1,240	40.91
Dietetic Technicians	260	290	300	190	210	(19.23)
Dietitians and Nutritionists	910	1,000	1,040	1,130	1,120	23.08
Emergency Medical Technicians and Paramedics	4,290	4,220	3,700	3,960	4,060	(5.36)
Epidemiologists	320	300	350	340	330	3.13
Exercise Physiologists	280	170	160	170	180	(35.71)
Family and General Practitioners	3,810	3,580	3,460	3,060	3,680	(3.41)
Genetic Counselors	60	30	40	40	50	(16.67)
Health Information Technologists, Medical Registrars, Surgical Assistants, a	4,030	4,160	3,250	680	790	(80.40)
Healthcare Support Workers, All Other	2,200	2,410	2,250	2,160	1,930	(12.27)
Hearing Aid Specialists	40	80	**	**	**	
Home Health and Personal Care Aides	13,230	9,180	9,510	35,790	36,610	176.72
Licensed Practical and Licensed Vocational Nurses	5,010	5,340	5,550	5,340	4,960	(1.00)
Magnetic Resonance Imaging Technologists	450	450	550	490	500	11.11
Massage Therapists	4,950	5,160	5,270	5,490	5,240	5.86
Medical and Health Services Managers	4,420	4,990	5,460	5,790	5,850	32.35
Medical Assistants	9,870	9,810	11,150	12,100	12,010	21.68
Medical Equipment Preparers	980	1,070	1,160	1,180	1,060	8.16
Medical Dosimetrists, Medical Records Specialists, and Health Technologist	2,780	2,910	3,070	5,350	5,090	83.09
Medical Transcriptionists	800	690	600	770	750	(6.25)
Nuclear Medicine Technologists	260	270	250	340	340	30.77
Nurse Anesthetists	290	380	340	430	370	27.59
Nurse Midwives	**	**	120	170	170	
Nurse Practitioners	2,620	2,810	2,920	2,870	3,080	17.56
Nursing Assistants	19,230	20,540	21,070	21,970	21,310	10.82
Obstetricians and Gynecologists	510	560	750	650	530	3.92
Occupational Therapists	2,670	2,770	3,130	3,340	3,380	26.59
Occupational Therapy Aides	70	60	70	60	70	0.00

Occupational Therapy Assistants	550	570	710	660	620	12.73
Ophthalmic Medical Technicians	860	1,210	1,280	1,380	1,370	59.30
Opticians, Dispensing	1,330	1,370	1,640	1,560	1,600	20.30
Optometrists	930	800	830	880	870	(6.45)
Orderlies	420	600	670	580	390	(7.14)
Orthotists and Prosthetists	100	110	120	100	150	50.00
Pediatricians, General	540	400	410	340	350	(35.19)
Pharmacists	5,510	5,270	5,180	5,150	5,350	(2.90)
Pharmacy Aides	150	160	140	170	160	6.67
Pharmacy Technicians	5,110	5,530	5,610	5,600	5,710	11.74
Phlebotomists	1,620	1,670	1,920	1,940	1,910	17.90
Physical Therapist Aides	450	430	460	510	470	4.44
Physical Therapist Assistants	1,160	1,270	1,470	1,500	1,360	17.24
Physical Therapists	4,740	5,040	5,250	5,100	5,130	8.23
Physician Assistants	2,850	3,180	3,190	3,030	3,080	8.07
Physicians, All Other; and Ophthalmologists, Except Pediatric	2,530	2,720	2,620	3,480	3,730	47.43
Podiatrists	**	140	110	90	70	(50.00)
Psychiatric Aides	270	420	520	810	580	114.81
Psychiatric Technicians	780	1,010	1,060	1,100	1,030	32.05
Psychiatrists	360	450	370	380	330	(8.33)
Radiation Therapists	250	240	210	220	290	16.00
Radiologic Technologists and Technicians	3,320	3,620	3,730	3,750	4,040	21.69
Recreational Therapists	110	120	140	270	340	209.09
Registered Nurses	47,590	49,340	51,760	52,510	52,330	9.96
Respiratory Therapists	1,810	1,880	2,080	2,080	2,040	12.71
Speech-Language Pathologists	3,190	3,410	3,540	3,980	3,950	23.82
Surgeons, Except Ophthalmologists	930	900	730	790	780	(16.13)
Surgical Technologists	1,530	1,580	1,900	1,720	1,740	13.73
Therapists, All Other	110	170	180	220	180	63.64

Average Annual Salary

JOB TITLE	2016	2017	2018	2019	2020	% Change
Anesthesiologists	272,760	261,920	270,180	268,160	289,920	6.29
Athletic Trainers	49,790	52,450	53,030	54,080	54,980	10.42
Audiologists	85,740	88,820	82,790	80,980	81,160	(5.34)
Cardiovascular Technologists and Technicians	68,520	71,410	69,280	69,560	71,560	4.44
Chiropractors	83,230	99,350	87,290	70,610	66,290	(20.35)
Clinical Laboratory Technologists and Technicians	55,508	56,600	57,650	57,850	59,170	6.60
Dental Assistants	38,590	38,660	40,390	42,050	43,930	13.84
Dental Hygienists	80,150	81,880	84,510	86,140	87,140	8.72
Dentists, General	175,210	168,110	174,930	169,070	184,550	5.33
Diagnostic Medical Sonographers	81,830	81,450	83,430	83,920	86,370	5.55
Dietetic Technicians	28,880	27,940	28,660	30,910	33,710	16.72
Dietitians and Nutritionists	59,800	60,430	60,500	61,080	61,550	2.93
Emergency Medical Technicians and Paramedics	42,280	41,900	42,320	41,880	42,900	1.47
Epidemiologists	68,000	65,080	60,550	63,950	65,830	(3.19)
Exercise Physiologists	51,140	50,060	49,890	50,650	51,500	0.70
Family and General Practitioners	217,230	222,240	220,960	201,383	202,250	(6.90)
Genetic Counselors	78,040	83,220	87,290	90,850	91,530	17.29
Health Information Technologists, Medical Registrars, Surgical Assistants, a	50,644	51,796	50,334	56,960	62,510	23.43
Healthcare Support Workers, All Other	32,150	32,650	33,600	34,290	36,830	14.56
Hearing Aid Specialists	47,590	53,100	57,110	57,230	58,070	22.02
Home Health and Personal Care Aides	27,080	26,540	26,980	28,020	30,350	12.08
Licensed Practical and Licensed Vocational Nurses	48,690	49,740	51,210	53,180	54,310	11.54
Magnetic Resonance Imaging Technologists	76,870	78,060	79,100	82,120	84,270	9.63
Massage Therapists	47,240	43,420	46,190	45,380	46,020	(2.58)
Medical and Health Services Managers	115,740	116,570	118,540	120,040	122,090	5.49
Medical Assistants	34,510	35,260	36,180	37,410	39,040	13.13
Medical Equipment Preparers	38,220	40,060	41,600	43,550	42,740	11.83
Medical Dosimetrists, Medical Records Specialists, and Health Technologist	48,730	49,040	49,340	49,100	50,570	3.78
Medical Transcriptionists	35,470	38,390	38,640	36,040	34,490	(2.76)
Nuclear Medicine Technologists	79,000	81,200	85,500	84,990	88,110	11.53
Nurse Anesthetists	146,410	152,240	172,700	175,100	175,760	20.05
Nurse Midwives	94,390	97,040	107,100	102,520	106,280	12.60
Nurse Practitioners	107,160	110,440	111,210	106,760	109,760	2.43
Nursing Assistants	30,150	32,040	32,610	33,980	34,470	14.33
Obstetricians and Gynecologists	241,340	277,770	286,560	274,680	285,710	18.38
Occupational Therapists	86,420	88,290	89,770	90,990	91,650	6.05
Occupational Therapy Aides	31,510	34,310	33,060	34,700	36,840	16.92

Occupational Therapy Assistants	50,670	54,690	57,230	57,990	57,730	13.93
Ophthalmic Medical Technicians	37,580	36,650	38,030	39,780	41,670	10.88
Opticians, Dispensing	39,070	39,060	39,510	40,030	41,790	6.96
Optometrists	132,980	124,800	132,030	123,520	130,390	(1.95)
Orderlies	28,110	29,220	30,380	31,330	31,210	11.03
Orthotists and Prosthetists	57,720	55,400	58,740	58,840	63,670	10.31
Pediatricians, General	207,870	200,990	185,770	162,010	188,900	(9.13)
Pharmacists	117,760	118,360	120,980	120,660	120,950	2.71
Pharmacy Aides	33,070	35,260	39,840	38,080	36,010	8.89
Pharmacy Technicians	34,820	36,250	36,880	38,000	39,020	12.06
Phlebotomists	36,230	34,930	35,800	36,470	37,830	4.42
Physical Therapist Aides	32,380	31,840	32,240	33,290	34,980	8.03
Physical Therapist Assistants	53,220	52,780	55,370	53,770	55,810	4.87
Physical Therapists	77,660	80,710	82,560	86,740	87,250	12.35
Physician Assistants	100,140	104,100	102,770	107,300	110,370	10.22
Physicians, All Other; and Ophthalmologists, Except Pediatric	239,540	253,000	219,310	220,710	247,520	3.33
Podiatrists	81,230	107,430	119,190	126,840	129,000	58.81
Psychiatric Aides	29,320	30,450	33,460	33,870	35,920	22.51
Psychiatric Technicians	38,530	38,540	37,980	38,890	40,860	6.05
Psychiatrists	232,520	235,450	234,860	243,030	225,690	(2.94)
Radiation Therapists	90,410	89,700	92,670	94,280	95,890	6.06
Radiologic Technologists and Technicians	63,650	63,750	64,660	66,420	68,330	7.35
Recreational Therapists	51,180	51,960	49,300	44,440	46,590	(8.97)
Registered Nurses	70,550	72,570	74,240	76,230	77,860	10.36
Respiratory Therapists	59,940	61,480	63,070	64,450	66,490	10.93
Speech-Language Pathologists	84,930	88,500	90,980	92,580	91,200	7.38
Surgeons, Except Ophthalmologists	261,320	239,850	244,940	250,480	276,700	5.89
Surgical Technologists	49,720	52,450	53,620	55,350	57,070	14.78
Therapists, All Other	65,090	61,670	60,800	58,840	60,830	(6.54)

Average Hourly Rate

JOB TITLE	2016	2017	2018	2019	2020	% Change
Anesthesiologists	131.14	125.92	129.89	129	139.38	6.28
Athletic Trainers	*	*	*	*	*	
Audiologists	41.22	42.70	39.80	39	39.02	(5.34)
Cardiovascular Technologists and Technicians	32.94	34.33	33.31	33	34.41	4.46
Chiropractors	40.02	47.76	41.97	34	31.87	(20.36)
Clinical Laboratory Technologists and Technicians	26.69	27.21	27.72	28	28.45	6.59
Dental Assistants	18.55	18.59	19.42	20	21.12	13.85
Dental Hygienists	38.54	39.37	40.63	41	41.89	8.69
Dentists, General	84.23	80.82	84.10	81	88.73	5.34
Diagnostic Medical Sonographers	39.34	39.16	40.11	40	41.52	5.54
Dietetic Technicians	13.89	13.43	13.78	15	16.21	16.70
Dietitians and Nutritionists	28.75	29.05	29.09	29	29.59	2.92
Emergency Medical Technicians and Paramedics	20.33	20.15	20.35	20	20.63	1.48
Epidemiologists	32.69	31.29	29.11	31	31.65	(3.18)
Exercise Physiologists	24.59	24.07	23.99	24	24.76	0.69
Family and General Practitioners	104.44	106.84	106.23	97	97.23	(6.90)
Genetic Counselors	37.52	40.01	41.97	44	44.01	17.30
Health Information Technologists, Medical Registrars, Surgical Assistants, a	24.35	24.90	24.20	27	30.05	23.41
Healthcare Support Workers, All Other	15.46	15.70	16.15	16	17.71	14.55
Hearing Aid Specialists	22.88	25.53	27.46	28	27.92	22.03
Home Health and Personal Care Aides	13.02	12.76	12.97	13	14.59	12.06
Licensed Practical and Licensed Vocational Nurses	23.41	23.91	24.62	26	26.11	11.53
Magnetic Resonance Imaging Technologists	36.96	37.53	38.03	39	40.52	9.63
Massage Therapists	22.71	20.88	22.21	22	22.12	(2.60)
Medical and Health Services Managers	55.65	56.04	56.99	58	58.70	5.48
Medical Assistants	16.59	16.95	17.40	18	18.77	13.14
Medical Equipment Preparers	18.38	19.26	20.00	21	20.55	11.81
Medical Dosimetrists, Medical Records Specialists, and Health Technologist	23.43	23.58	23.72	24	24.31	3.76
Medical Transcriptionists	17.06	18.46	18.58	17	16.58	(2.81)
Nuclear Medicine Technologists	37.98	39.04	41.11	41	42.36	11.53
Nurse Anesthetists	70.39	73.19	83.03	84	84.50	20.05
Nurse Midwives	45.38	46.66	51.49	49	51.10	12.60
Nurse Practitioners	51.52	53.10	53.47	51	52.77	2.43
Nursing Assistants	14.49	15.41	15.68	16	16.57	14.35
Obstetricians and Gynecologists	116.03	133.55	137.77	132	137.36	18.38
Occupational Therapists	41.55	42.45	43.16	44	44.06	6.04
Occupational Therapy Aides	15.15	16.50	15.90	17	17.71	16.90

Occupational Therapy Assistants	24.36	26.29	27.51	28	27.75	13.92
Ophthalmic Medical Technicians	18.07	17.62	18.28	19	20.03	10.85
Opticians, Dispensing	18.78	18.78	19.00	19	20.09	6.98
Optometrists	63.93	60.00	63.47	59	62.69	(1.94)
Orderlies	13.51	14.05	14.60	15	15.00	11.03
Orthotists and Prosthetists	27.75	26.64	28.24	28	30.61	10.31
Pediatricians, General	99.94	96.63	89.31	78	90.82	(9.13)
Pharmacists	56.62	56.90	58.16	58	58.15	2.70
Pharmacy Aides	15.90	16.95	19.16	18	17.31	8.87
Pharmacy Technicians	16.74	17.43	17.73	18	18.76	12.07
Phlebotomists	17.42	16.80	17.21	18	18.19	4.42
Physical Therapist Aides	15.57	15.31	15.50	16	16.82	8.03
Physical Therapist Assistants	25.58	25.37	26.62	26	26.83	4.89
Physical Therapists	37.34	38.80	39.69	42	41.95	12.35
Physician Assistants	48.14	50.05	49.41	52	53.06	10.22
Physicians, All Other; and Ophthalmologists, Except Pediatric	115.17	121.63	105.44	106	119.00	3.33
Podiatrists	39.05	51.65	57.30	61	62.02	58.82
Psychiatric Aides	14.09	14.64	16.08	16	17.27	22.57
Psychiatric Technicians	18.52	18.53	18.26	19	19.65	6.10
Psychiatrists	111.79	113.20	112.91	117	108.51	(2.93)
Radiation Therapists	43.47	43.13	44.55	45	46.10	6.05
Radiologic Technologists and Technicians	30.60	30.65	31.09	32	32.85	7.35
Recreational Therapists	24.60	24.98	23.70	21	22.40	(8.94)
Registered Nurses	33.92	34.89	35.69	37	37.43	10.35
Respiratory Therapists	28.82	29.56	30.32	31	31.97	10.93
Speech-Language Pathologists	40.83	42.55	43.74	45	43.85	7.40
Surgeons, Except Ophthalmologists	125.63	115.31	117.76	120	133.03	5.89
Surgical Technologists	23.90	25.22	25.78	27	27.44	14.81
Therapists, All Other	31.29	29.65	29.23	28	29.24	(6.55)