

Tobacco Settlement Fund Budget Briefing Enacted 2016/17 Budget

The 2016/17 budget spends \$378.7 million from the Tobacco Settlement Fund, an increase of \$39.5 million compared to 2015/16. As in previous years, the General Assembly amended the funding provisions in the Fiscal Code to redirect tobacco revenue to other health-related purposes. The amended provisions shifted \$24.7 million of tobacco revenue to help fund Medical Assistance long-term care in the Department of Human Services. Additionally, the Fiscal Code transferred \$28.5 million to the General Fund to support the state budget.

Background

The Tobacco Settlement Fund is a special fund for the deposit of payments received by Pennsylvania under the 1998 Master Settlement Agreement between the major tobacco companies and 46 states. The agreement settled claims filed against the tobacco industry to recover Medicaid costs associated with treating smoking-related illnesses. In exchange for the states dropping their lawsuits, the tobacco companies agreed to make annual payments in perpetuity to the settling states.

Act 77 of 2001 (the Tobacco Settlement Act) created the Tobacco Settlement Fund and also established several health-related programs which are supported by the fund. Each year, annual tobacco payments are distributed to programs based on percentages set forth in state law.

The table on the right shows the allocation percentages established in the Fiscal Code under Act 71 of 2013. These percentages replaced the allocation percentages that were initially part of the Tobacco Settlement Act.

The funding provisions in Act 71 allocate most of the annual tobacco payments (77.3 percent) to specific programs and retain the rest of the payments in the Tobacco Settlement Fund to be appropriated by the General Assembly for other health-related purposes.

Additionally, Act 71 requires all other payments and revenues received in the Tobacco Settlement Fund to be appropriated for health-related purposes. This includes the strategic contribution payments tobacco companies must make to Pennsylvania for the 10-year period, 2008 through 2017.

	Act 71-2013
Programs Funded with Annual Tobacco Payments	Allocation
Home & Community-Based Services	13%
Tobacco Use Prevention & Cessation	4.5%
Health Research - Broad Based	12.6%
Health Research - Cancer	1%
Hospital Uncompensated Care	8.18%
Medical Assistance for Workers with Disabilities	30%
PACENET Transfer	8%
Health-Related Purposes	22.72%

Revenues and Funding Modifications

The 2016/17 budget spends a total of \$378.7 million from the Tobacco Settlement Fund. This includes the following revenue, of which \$69.5 million (from the strategic contribution payment and fund balances) is non-recurring revenue:

 \$309.2 million from the annual payments Pennsylvania anticipates from tobacco companies in 2016/17, an \$8.4 million decrease from 2015/16;

- \$20.95 million from the 10th and final strategic contribution payment anticipated in April 2017; and
- \$48.5 million from balances in the Tobacco Settlement Fund, including \$28.5 million of previously withheld payments that Pennsylvania anticipates receiving in April 2017.

Through amendments to the Fiscal Code (Act 85/ House Bill 1605), the General Assembly eliminated the 8 percent allocation for PACENET and increased the allocation for health-related purposes from 22.72 percent to 30.72 percent. This change redirected \$24.7 million to help fund long-term care in the Department of Human Services. 2016/17 is the fourth consecutive budget in which the PACENET allocation was eliminated.

In addition to these redirected dollars, Act 85 authorizes prior year funds to be appropriated for health-related purposes, increasing tobacco funds for long-term care by another \$20 million.

Finally, Act 85 transfers \$28.5 million from the Tobacco Settlement Fund to the General Fund. This is the fourth budget in which Tobacco Settlement Fund revenue was transferred to the General Fund. The other transfers occurred in 2001/02 (\$68.5 million), 2009/10 (\$17.7 million) and 2010/11 (\$264.7 million).

Program Expenditures

The table below details 2016/17 Tobacco Settlement Fund expenditures by program, beginning with those

designated in Act 77 to receive ongoing support. Three programs rely exclusively tobacco on funding for their support: health research, tobacco use prevention and cessation, and hospital uncompensated care payments. remaining programs are with supported other revenue sources, including the General Fund, Lottery Fund and federal funds.

Expenditures for the two health-related programs – long-term care and life sciences greenhouses – are appropriated from the Tobacco Settlement Fund as part of the General Appropriations Act. All Act 77 program expenditures are made by executive authorizations according to the allocation percentages in the Fiscal Code.

Funds transferred to the General Fund are not designated for any specific use.

Program Descriptions

Home and Community-Based Services. Act 77 designated this funding to enable more seniors to receive home- and community-based services as an alternative to nursing home care. The Department of Human Services uses the allocation to support the Aging Waiver program for seniors, age 60 or older, who are eligible for Medical Assistance. These tobacco funds earn federal Medicaid matching funds.

 NOTE: In addition to the tobacco allocation, the Aging Waiver is supported in the 2016/17 budget with a \$277.7 million appropriation from the General Fund and a \$120.7 million appropriation from the Lottery Fund.

Tobacco Use Prevention and Cessation Programs. As directed by Act 77, the Department of Health administers a comprehensive tobacco control program that is based on best practices from the national Centers for Disease Control. The department must use at least 70 percent of the annual tobacco allocation to develop local programs

(amounts in millions)			
		2015/16	2016/17
Tobacco Settlement Fund E	Expenditures	Actual	Budgeted
Act 77 Programs:			
Home and Community-Based Services		\$41.29	\$40.20
Tobacco Use Prevention and Cessation		\$14.29	\$13.91
Health Research - Health Priorities		\$40.02	\$38.96
Health Research - National Cancer Institute		\$3.18	\$3.09
Hospital Uncompensated Care		\$25.98	\$25.29
Medical Assistance for W	orkers with Disabilities	\$95.28	\$92.76
PACEnet Transfer		\$0.00	\$0.00
Health-Related Purposes:			
Medical Assistance - Long Term Care		\$116.08	\$132.94
Life Sciences Greenhouse	S	\$3.00	\$3.00
Transfer to General Fund			\$28.50
TOTAL		\$339.11	\$378.66

in designated service areas throughout the commonwealth. It uses the remaining allocation for statewide efforts, including enforcement of the Clean Indoor Air Act.

Health Research. Act 77 established the Commonwealth Universal Research Enhancement, or CURE, program in the Department of Health to fund research projects conducted by Pennsylvania-based researchers, universities, medical schools and other institutions. The current statutory formula allocates 13.6 percent of annual tobacco payments to CURE, with 12.6 percent designated for broadbased health research and one percent awarded to eligible institutions that received National Cancer Institute funding.

Medical Assistance for Workers with Disabilities, or MAWD. The Department of Human Services administers this medical assistance purchase program, which was established under Act 77 for working Pennsylvanians, age 16 to 64, who have a disability and whose income is less than 250 percent of the federal poverty level. Act 77 requires Medical Assistance for Workers with Disabilities enrollees to pay the department a monthly premium, equal to five percent of their monthly premium, to purchase their Medical Assistance coverage. The department uses its tobacco allocation to pay the remaining state share of program costs. These tobacco funds qualify for federal Medicaid matching funds.

 NOTE: If the annual tobacco allocation is not sufficient to cover the state share of program expenditures, the difference is paid with revenue from the General Fund. For 2016/17, the General Fund budget includes a \$13 million state appropriation for MAWD.

Hospital Uncompensated Care. Act 77 established the Hospital Uncompensated Care Program in the Department of Humans Services to partially reimburse hospitals for costs incurred in treating patients with inadequate or no insurance. The department must use 85 percent of its tobacco allocation for uncompensated care payments to hospitals for the cost of treatment provided to individuals who are uninsured or unable to pay for services, and 15 percent for extraordinary expense payments to hospitals for treating uninsured patients whose cost of care exceeds twice the

hospital's average cost per stay. Eligible hospitals may choose to receive either the uncompensated care payment or the extraordinary expense payment, but cannot receive both. The tobacco funds qualify for federal Medicaid matching funds.

PACENET Transfer. These funds are to be transferred to the PACE Fund to support provisions in Act 77, which expanded PACENET, a pharmaceutical assistance program for seniors administered by the Department of Aging. Act 77 increased income eligibility for PACENET by \$1,000 in 2001, raising the annual income limit to \$17,000 for single individuals and \$20,200 for married couples. (Please note that due to subsequent legislation amending the state lottery law, the current PACENET income limit is \$23,500 for single individuals and \$31,500 for married couples.)

Medical Assistance Long-Term Care. Nursing home care for Medicaid recipients is funded through the Medical Assistance Long Term Care appropriation in the Department of Humans Services. The department uses tobacco funds to offset the state General Fund costs for nursing home care — each dollar appropriated from the Tobacco Settlement Fund means one less state dollar needs to be appropriated from the General Fund. These tobacco funds earn federal Medicaid matching funds.

 The General Assembly first appropriated tobacco funds for long-term care in 2002/03 and has appropriated funds every fiscal year since 2005/06.

Life Sciences Greenhouses. The Department of Community and Economic Development uses these funds to support the three regional biotechnology research centers that were created under Act 77. The life sciences greenhouses invest in companies focused on the research, development and commercialization of cutting-edge therapies and medical technologies. Act 77 included \$100 million in start-up funding for the greenhouses.

 The General Assembly has appropriated tobacco funds for the greenhouses every fiscal year since 2006/07.