**2017 Supplemental Budget**

**Decision Package**

**Agency:**

**Decision Package Code/Title:**

**Budget Period:**

**Budget Level:**

**Agency Recommendation Summary Text:**

**Fiscal Summary:** Decision package total dollar and FTE cost/savings by year, by fund, for 3 years. Additional fiscal details are required below.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Operating Expenditures** | **FY 2016** | **FY 2017** | **FY 2018** | **FY 2019** |
| Fund AAA-X |  | yyy | zzz | aaa |
| Fund BBB-Y |  | yyy | zzz | aaa |
| **Total Cost** |  | **yyy** | **zzz** | **aaa** |
| Staffing | **FY 2016** | **FY 2017** | **FY 2018** | **FY 2019** |
| FTEs |  | x.y | x.y | x.y |
| **Revenue** | **FY 2016** | **FY 2017** | **FY 2018** | **FY 2019** |
| Fund AAA-X |  | x.y | x.y | x.y |
| Fund BBB-X |  | x.y | x.y | x.y |
| **Object of Expenditure** | **FY 2016** | **FY 2017** | **FY 2018** | **FY 2019** |
| Obj. X |  | yyy | zzz | aaa |
| Obj. X |  | yyy | zzz | aaa |
| Obj. X |  | yyy | zzz | aaa |

**Package Description:**

**Base Budget: If the proposal is an expansion or alteration of a current program or service, provide information on the resources now devoted to the program or service.** Please include annual expenditures and FTEs by fund and activity (or provide working models or backup materials containing this information).

**Decision Package expenditure, FTE and revenue assumptions, calculations and details:** Agencies must clearly articulate the workload or policy assumptions used in calculating expenditure and revenue changes proposed.

**Decision Package Justification and Impacts**

**What specific performance outcomes does the agency expect?**

Describe and quantify the specific performance outcomes the agency expects as a result of this funding change.

**Performance Measure detail:**

**Fully describe and quantify expected impacts on state residents and specific populations served.**

**What are other important connections or impacts related to this proposal?** Please complete the following table and provide detailed explanations or information below:

|  |  |  |
| --- | --- | --- |
| **Impact(s) To:** |  | **Identify / Explanation** |
| **Regional/County impacts?** | **Select Y/N** | **Identify:** |
| **Other local gov’t impacts?**  | **Select Y/N** | **Identify:** |
| **Tribal gov’t impacts?** | **Select Y/N** | **Identify:** |
| **Other state agency impacts?** | **Select Y/N** | **Identify:** |
| **Responds to specific task force, report, mandate or exec order?** | **Select Y/N** | **Identify:** |
| **Does request contain a compensation change?** | **Select Y/N** | **Identify:** |
| **Does request require a change to a collective bargaining agreement?** | **Select Y/N** | **Identify:** |
| **Facility/workplace needs or impacts?** | **Select Y/N** | **Identify:** |
| **Capital Budget Impacts?** | **Select Y/N** | **Identify:** |
| **Is change required to existing statutes, rules or contracts?** | **Select Y/N** | **Identify:** |
| **Is the request related to or a result of litigation?** | **Select Y/N** | **Identify lawsuit (please consult with Attorney General’s Office):** |
| **Is the request related to Puget Sound recovery?** | **Select Y/N** | **If yes, see budget instructions Section 14.4 for additional instructions** |
| **Identify other important connections** |  |  |

**Please provide a detailed discussion of connections/impacts identified above.**

**What alternatives were explored by the agency and why was this option chosen?**

**What are the consequences of not funding this request?**

**How has or can the agency address the issue or need in its current appropriation level?**

**Other supporting materials:** Please attach or reference any other supporting materials or information that will help analysts and policymakers understand and prioritize your request.

**Information technology:** Does this Decision Package include funding for any IT-related costs, including hardware, software, services (including cloud-based services), contracts or IT staff?

[ ]  No 

[ ]  Yes Continue to IT Addendum below and follow the directions on the bottom of the addendum to meet requirements for OCIO review.)

1. Supplemental Budget - IT Addendum

# Part 1: Itemized IT Costs

Please itemize any IT-related costs, including hardware, software, services (including cloud-based services), contracts (including professional services, quality assurance, and independent verification and validation), or IT staff. Be as specific as you can. (See chapter 12.1 of the operating budget instructions for guidance on what counts as “IT-related costs”)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Information Technology Items in this DP****(***insert rows as required***)** | **~~FY 2016~~** | **FY 2017** | **FY 2018** | **FY 2019** |
| Item 1 |  | Yyy | zzz | aaa |
| Item 2 |  | Yyy | zzz | aaa |
| **Total Cost** |  | **Enter Sum** | **Enter Sum** | **Enter Sum** |

# Part 2: Identifying IT Projects

If the investment proposed in the decision package is the development or acquisition of an IT project/system, or is an enhancement to or modification of an existing IT project/system, it will also be reviewed and ranked by the OCIO as required by RCW 43.88.092. The answers to the three questions below will help OFM and the OCIO determine whether this decision package is, or enhances/modifies, an IT project:

1. Does this decision package fund the development or acquisition of a [ ] Yes [ ]  No
new or enhanced software or hardware system or service?
2. Does this decision package fund the acquisition or enhancements [ ] Yes [ ]  No
of any agency data centers? (See [OCIO Policy 184](https://ocio.wa.gov/policies/policy-184-data-center-investments) for definition.)
3. Does this decision package fund the continuation of a project that [ ] Yes [ ]  No
is, or will be, under OCIO oversight? (See [OCIO Policy 121](https://ocio.wa.gov/policies/121-it-investments-approval-and-oversight).)

If you answered “yes” to *any* of these questions, you must complete a concept review with the OCIO before submitting your budget request. Refer to chapter 12.2 of the operating budget instructions for more information.