

#### ARIZONA STATE BOARD OF HOMEOPATHIC and INTEGRATED MEDICINE EXAMINERS

Douglas A. Ducey
Governor
Mario Fontes
President
Mary Grace Warner, MD, MD(H)
Secretary-Treasurer

(602) 542-8154 Phone 1740 W. Adams Phoenix, AZ 85007 www.homeopath.az.gov

David Geriminsky Executive Director info@homeopath.az.gov

September 1, 2020

Douglas A Ducey, Governor 1700 West Washington Executive Tower – Ninth Floor Phoenix, AZ 85007

RE: FY22 Budget

Dear Governor Ducey:

Enclosed please find the Board of Homeopathic and Integrated Medicine Examiners budget for Fiscal Year 2022

The board continues to experience challenges due to declining applications. There is ongoing work to remove regulatory hurdles and administrative burdens in order to provide a more accessible licensing process to applicants. Further the Board has partnered with the AZ Acupuncture Board of Examiners to share staffing and other administrative functions. This cooperation has allowed the Board to become financially solvent while still providing high levels of service to licensees and the public.

Please contact me if you have any questions.

Sincerely,

David Geriminsky Executive Director

#### **Douglas A. Ducey**

Governor

#### **Mario Fontes**

President

Mary Grace Warner-Dunlop, MD, MD(H)

Secretary-Treasurer



#### **David Geriminsky**

Executive Director info@homeopath.az.gov

## Board of Homeopathic and Integrated Medicine Examiners

1740 W. Adams
Phoenix, Arizona 85007
Telephone (602) 542-3095

## **ORGANIZATIONAL CHART** Douglas A. Ducey Governor Mary Grace Warner, Mario Fontes, L.AC. Jennifer Hancock Michael Loes, MD, Matthew Klein, DO, MD, MD(H) MD(H) DO(H) President **Public Member** Secretary-Treasurer David Geriminsky **Executive Director**

Melissa Sanchez Licensing Coordinator



#### **State of Arizona Budget Request**

State Agency

#### **Board of Homeopathic and Integrated Medicine Examiners**

A.R.S. Citation: 32-2901

Appropriated Funds
FY 2021 Approp Fund. Issue Total Amount Requested:

Total Amount Requested:
46.6
0.0
46.6
Homeopathic Medical Examiners

#### **Governor DUCEY:**

This and the accompanying budget schedules, statements and explanatory information constitute the operating budget request for this agency for Fiscal Year 2022.

To the best of my knowledge all statements and explanations contained in the estimates submitted are true and correct.

Agency Head: David Geriminsky

Title: Executive Director

David Geriminsky 9/1/2020

(signature)

Phone: (602) 364-0145

Prepared By: David Geriminsky

Email Address: director@acupuncture.az.gov
Date Prepared: Tuesday, September 1, 2020

Total: 46.6 0.0 46.6

Date Printed: 9/2/2020 9:58:55 AM Transmittal Statement All dollars are presented in thousands. Page 1

#### **Sources and Uses of Funds**

**Board of Homeopathic and Integrated Medicine Examiners** Agency: HE2041 Fund: **Homeopathic Medical Examiners** 

|   |                | FY 2021             | FY 2022             |
|---|----------------|---------------------|---------------------|
| Balance Forward from Prior Year                 | 36.6           | 54.3                | 67.1                |
| Revenue (From Revenue Schedule)                 | 59.4           | 59.4                | 63.2                |
| Total Available                                 | 96.0           | 113.7               | 130.3               |
| Total Appropriated Disbursements                | 41.7           | 46.6                | 46.6                |
| Total Non-Appropriated Disbursements            | 0.0            | 0.0                 | 0.0                 |
| Balance Forward to Next Year                    | 54.3           | 67.1                | 83.7                |
| Appropriated Expenditure                        |                |                     |                     |
| Expenditure Categories                          | Actual FY 2020 | Estimate<br>FY 2021 | Estimate<br>FY 2022 |
| Personal Services                               | 17.7           | 23.7                | 23.7                |
| Employee Related Expenses                       | 5.9            | 5.9                 | 5.9                 |
| Prof. And Outside Services                      | 0.0            | 0.0                 | 0.0                 |
| Travel - In State                               | 0.0            | 0.0                 | 0.0                 |
| Travel - Out of State                           | 0.0            | 0.0                 | 0.0                 |
| Food  | 0.0            | 0.0                 | 0.0                 |
| Aid to Organizations and Individuals            | 0.0            | 0.0                 | 0.0                 |
| Other Operating Expenses                        | 16.7           | 17.0                | 17.0                |
| Equipment                                       | 0.0            | 0.0                 | 0.0                 |
| Capital Outlay                                  | 0.0            | 0.0                 | 0.0                 |
| Debt Service                                    | 0.0            | 0.0                 | 0.0                 |
| Cost Allocation                                 | 0.0            | 0.0                 | 0.0                 |
| Transfers                                       | 0.0            | 0.0                 | 0.0                 |
| Expenditure Categories Total:                   | 40.3           | 46.6                | 46.6                |
| Non-Lapsing Authority from Prior Years          | 0.0            | 0.0                 | 0.0                 |
| Administrative Adjustments                      | 1.4            | 0.0                 | 0.0                 |
| Capital Projects (Land, Buildings,Improvements) | 0.0            | 0.0                 | 0.0                 |
| Appropriated 27th Pay Roll                      | 0.0            | 0.0                 | 0.0                 |
| Legislative Fund Transfers                      | 0.0            | 0.0                 | 0.0                 |
| IT Project Transfers                            | 0.0            | 0.0                 | 0.0                 |
| Appropriated Expenditure Total:                 | 41.7           | 46.6                | 46.6                |
| Apppropriated FTE:                              | 1.0            | 1.0                 | 1.0                 |
| Fund Description                                |                |                     |                     |

OSPB:

Revenues are the fees, fines, and other revenue received by the Board. Funds are used to license and regulate medical physicians who practice homeopathy.

### **Revenue Schedule**

| Agency:     | Board of Homeopathic and Integrated Medicine Examiners |             |         |         |         |
|-------------|--|-------------|---------|---------|---------|
| Fund: AA100 | 0 General Fund   |             |         |         |         |
| AFIS Code   | Category of Receipt and Description                    |             | FY 2020 | FY 2021 | FY 2022 |
| 4415        | OCCUPATIONAL AND PROFESSIONAL LICENSES                 | _           | 6.2     | 6.2     | 6.2     |
| 4519        | OTHER FINES OR FORFEITURES OR PENALTIES                |             | 0.3     | 0.3     | 0.3     |
|             |  | Fund Total: | 6.5     | 6.5     | 6.5     |

### **Revenue Schedule**

| Agency:    | Board of Homeopathic and Integrated Medicine Examiners |                    |         |         |
|------------|--|--------------------|---------|---------|
| Fund: HE20 | 41 Homeopathic Medical Examiners                       |                    |         |         |
| AFIS Code  | Category of Receipt and Description                    | FY 2020            | FY 2021 | FY 2022 |
| 4372       | PUBLICATIONS AND REPRODUCTIONS                         | 0.1                | 0.1     | 0.1     |
| 4415       | OCCUPATIONAL AND PROFESSIONAL LICENSES                 | 56.2               | 56.2    | 60.0    |
| 4519       | OTHER FINES OR FORFEITURES OR PENALTIES                | 2.5                | 2.5     | 2.5     |
| 4649       | CREDIT CARD CONVENIENCE FEES REVENUE                   | 0.2                | 0.2     | 0.2     |
| 4699       | MISCELLANEOUS RECEIPTS                                 | 0.4                | 0.4     | 0.4     |
|            | Fund   | <b>Total:</b> 59.4 | 59.4    | 63.2    |

## **Program Summary of Expenditures and Budget Request**

Agency: Board of Homeopathic and Integrated Medicine Examiners

Program: Licensing and Regulation

|       |   | FY 2020<br>Actual | FY 2021<br>Expd. Plan | FY 2022<br>Fund. Issue | FY 2022<br>Total Request |
|-------|---|-------------------|-----------------------|------------------------|--------------------------|
| Prog  | ram Summary                                       |                   |                       |                        |                          |
| 1-1   | Licensing and Regulation                          | 40.3              | 46.6                  | 0.0                    | 46.6                     |
|       | Program Summary Total:                            | 40.3              | 46.6                  | 0.0                    | 46.6                     |
| Expe  | nditure Categories                                |                   |                       |                        |                          |
| 0000  | FTE Positions                                     | 1.0               | 1.0                   | 0.0                    | 1.0                      |
| 6000  | Personal Services                                 | 17.7              | 23.7                  | 0.0                    | 23.7                     |
| 6100  | Employee Related Expenses                         | 5.9               | 5.9                   | 0.0                    | 5.9                      |
| 6200  | Professional and Outside Services                 | 0.0               | 0.0                   | 0.0                    | 0.0                      |
| 6500  | Travel In-State                                   | 0.0               | 0.0                   | 0.0                    | 0.0                      |
| 6600  | Travel Out of State                               | 0.0               | 0.0                   | 0.0                    | 0.0                      |
| 6700  | Food  | 0.0               | 0.0                   | 0.0                    | 0.0                      |
| 6800  | Aid to Organizations and Individuals              | 0.0               | 0.0                   | 0.0                    | 0.0                      |
| 7000  | Other Operating Expenses                          | 16.7              | 17.0                  | 0.0                    | 17.0                     |
| 8000  | Equipment   | 0.0               | 0.0                   | 0.0                    | 0.0                      |
| 8100  | Capital Outlay                                    | 0.0               | 0.0                   | 0.0                    | 0.0                      |
| 8600  | Debt Service                                      | 0.0               | 0.0                   | 0.0                    | 0.0                      |
| 9000  | Cost Allocation                                   | 0.0               | 0.0                   | 0.0                    | 0.0                      |
| 9100  | Transfers   | 0.0               | 0.0                   | 0.0                    | 0.0                      |
|       | Expenditure Categories Total:                     | 40.3              | 46.6                  | 0.0                    | 46.6                     |
| Fund  | Source  |                   |                       |                        |                          |
| Appro | priated Funds                                     |                   |                       |                        |                          |
| HE20  | 41-A Homeopathic Medical Examiners (Appropriated) | 40.3              | 46.6                  | 0.0                    | 46.6                     |
|       | _   | 40.3              | 46.6                  | 0.0                    | 46.6                     |
|       | Fund Source Total:                                | 40.3              | 46.6                  | 0.0                    | 46.6                     |

### **Program Summary of Expenditures and Budget Request**

Agency: Board of Homeopathic and Integrated Medicine Examiners
Program: Licensing and Regulation

FY 2020 FY 2021 FY 2022 FY 2022

Actual Expd. Plan Fund. Issue Total Request

## Program Group Summary of Expenditures and Budget Request for Selected Funds

| Agency:                       | Board of Homeopathic and Integ    | grated Medicine I | Examiners             |                        |                          |
|-------------------------------|-----------------------------------|-------------------|-----------------------|------------------------|--------------------------|
| Program:                      | Licensing and Regulation          |                   |                       |                        |                          |
|                               |                                   | FY 2020<br>Actual | FY 2021<br>Expd. Plan | FY 2022<br>Fund. Issue | FY 2022<br>Total Request |
| Fund: HE20                    | 41-A Homeopathic Medical Examiner | s (Appropriated)  |                       |                        |                          |
| Program Expendit              | tures                             |                   |                       |                        | '                        |
| COST CEI                      | NTER/PROGRAM BUDGET UNIT          |                   |                       |                        |                          |
| 1-1 Licensing a               | and Regulation                    | 40.3              | 46.6                  | 0.0                    | 46.6                     |
|                               | Total                             | 40.3              | 46.6                  | 0.0                    | 46.6                     |
| Appropriated Fund             | ding                              |                   |                       |                        |                          |
| Expenditure Catego            | ories                             |                   |                       |                        |                          |
| FTE Position                  | ons                               | 1.0               | 1.0                   | 0.0                    | 1.0                      |
| Persona                       | ll Services                       | 17.7              | 23.7                  | 0.0                    | 23.7                     |
| Employe                       | ee Related Expenses               | 5.9               | 5.9                   | 0.0                    | 5.9                      |
| Professi                      | onal and Outside Services         | 0.0               | 0.0                   | 0.0                    | 0.0                      |
| Travel I                      | n-State                           | 0.0               | 0.0                   | 0.0                    | 0.0                      |
| Travel (                      | Out of State                      | 0.0               | 0.0                   | 0.0                    | 0.0                      |
| Food                          |                                   | 0.0               | 0.0                   | 0.0                    | 0.0                      |
| Aid to C                      | Organizations and Individuals     | 0.0               | 0.0                   | 0.0                    | 0.0                      |
| Other O                       | perating Expenses                 | 16.7              | 17.0                  | 0.0                    | 17.0                     |
| Equipm                        | ent                               | 0.0               | 0.0                   | 0.0                    | 0.0                      |
| Capital                       | •                                 | 0.0               | 0.0                   | 0.0                    | 0.0                      |
| Debt Se                       | ervice                            | 0.0               | 0.0                   | 0.0                    | 0.0                      |
| Cost All                      |                                   | 0.0               | 0.0                   | 0.0                    | 0.0                      |
| Transfe                       | rs                                | 0.0               | 0.0                   | 0.0                    | 0.0                      |
| Expenditure Categories Total: |                                   | 40.3              | 46.6                  | 0.0                    | 46.6                     |
| Fund HE2041-A Total:          |                                   | 40.3              | 46.6                  | 0.0                    | 46.6                     |
| Program 1 Total:              |                                   | 40.3              | 46.6                  | 0.0                    | 46.6                     |

Date Printed: 9/2/2020 9:59:14 AM

## Program Budget Unit Summary of Expenditures and Budget Request for All Funds

Agency: Board of Homeopathic and Integrated Medicine Examiners

Program: Licensing and Regulation

|       |   |         |            |             | -            |
|-------|---|---------|------------|-------------|--------------|
|       |   | FY 2020 | FY 2021    | FY 2022     | FY 2022      |
| Expe  | nditure Categories                                | Actual  | Expd. Plan | Fund. Issue | Total Reques |
| 0000  | FTE   | 1.0     | 1.0        | 0.0         | 1.0          |
| 6000  | Personal Services                                 | 17.7    | 23.7       | 0.0         | 23.7         |
| 6100  | Employee Related Expenses                         | 5.9     | 5.9        | 0.0         | 5.9          |
| 6200  | Professional and Outside Services                 | 0.0     | 0.0        | 0.0         | 0.0          |
| 6500  | Travel In-State                                   | 0.0     | 0.0        | 0.0         | 0.0          |
| 6600  | Travel Out of State                               | 0.0     | 0.0        | 0.0         | 0.0          |
| 6700  | Food  | 0.0     | 0.0        | 0.0         | 0.0          |
| 6800  | Aid to Organizations and Individuals              | 0.0     | 0.0        | 0.0         | 0.0          |
| 7000  | Other Operating Expenses                          | 16.7    | 17.0       | 0.0         | 17.0         |
| 8000  | Equipment   | 0.0     | 0.0        | 0.0         | 0.0          |
| 8100  | Capital Outlay                                    | 0.0     | 0.0        | 0.0         | 0.0          |
| 8600  | Debt Service                                      | 0.0     | 0.0        | 0.0         | 0.0          |
| 9000  | Cost Allocation                                   | 0.0     | 0.0        | 0.0         | 0.0          |
| 9100  | Transfers   | 0.0     | 0.0        | 0.0         | 0.0          |
|       | <b>Expenditure Categories Total:</b>              | 40.3    | 46.6       | 0.0         | 46.6         |
| Fund  | Source  |         |            |             |              |
| Appro | priated Funds                                     |         |            |             |              |
| HE20  | 41-A Homeopathic Medical Examiners (Appropriated) | 40.3    | 46.6       | 0.0         | 46.6         |
|       | _   | 40.3    | 46.6       | 0.0         | 46.6         |
|       | Fund Source Total:                                | 40.3    | 46.6       | 0.0         | 46.6         |
|       |   |         |            |             |              |

## Program Budget Unit Summary of Expenditures and Budget Request for All Funds

Agency: Board of Homeopathic and Integrated Medicine Examiners

Program: Licensing and Regulation

FY 2020 FY 2021 FY 2022 FY 2022

Expenditure Categories Actual Expd. Plan Fund. Issue Total Request

# Program Budget Unit Summary of Expenditures and Budget Request for Selected Funds

|             |  | FY 2020 | FY 2021    | FY 2022     | FY 2022      |
|-------------|--|---------|------------|-------------|--------------|
|             |  | Actual  | Expd. Plan | Fund. Issue | Total Reques |
| ogram:      | Licensing and Regulation               |         |            |             |              |
| Fund:       | HE2041-A Homeopathic Medical Examiners |         |            |             |              |
| Appropr     | iated                                  |         |            |             |              |
| 0000        | FTE                                    | 1.0     | 1.0        | 0.0         | 1            |
| 6000        | Personal Services                      | 17.7    | 23.7       | 0.0         | 23           |
| 6100        | Employee Related Expenses              | 5.9     | 5.9        | 0.0         | 5            |
| 6200        | Professional and Outside Services      | 0.0     | 0.0        | 0.0         | 0            |
| 6500        | Travel In-State                        | 0.0     | 0.0        | 0.0         | 0            |
| 6600        | Travel Out of State                    | 0.0     | 0.0        | 0.0         | 0            |
| 6700        | Food                                   | 0.0     | 0.0        | 0.0         | C            |
| 6800        | Aid to Organizations and Individuals   | 0.0     | 0.0        | 0.0         | O            |
| 7000        | Other Operating Expenses               | 16.7    | 17.0       | 0.0         | 17           |
| 8000        | Equipment                              | 0.0     | 0.0        | 0.0         | C            |
| 8100        | Capital Outlay                         | 0.0     | 0.0        | 0.0         | C            |
| 8600        | Debt Service                           | 0.0     | 0.0        | 0.0         | O            |
| 9000        | Cost Allocation                        | 0.0     | 0.0        | 0.0         | 0            |
| 9100        | Transfers                              | 0.0     | 0.0        | 0.0         | 0            |
| Appro       | priated Total:                         | 40.3    | 46.6       | 0.0         | 46           |
| Fund Total: |  | 40.3    | 46.6       | 0.0         | 46           |
| ogram Total | For Selected Funds:                    | 40.3    | 46.6       | 0.0         | 46           |

# Program Budget Unit Summary of Expenditures and Budget Request for Selected Funds

| Agency: | Board of Homeopathic and Integrated Medicine Examiners |         |         |         |         |
|---------|--|---------|---------|---------|---------|
|         |  | FY 2020 | FY 2021 | FY 2022 | FY 2022 |
|         | Actual Expd. Plan Fund. Issue Total R                  |         |         |         |         |

| Agency:  | Board of Homeopathic and Integrated Medicine Examiners |  |
|----------|--|--|
| Program: | Licensing and Regulation                               |  |

| Program. Licensing and Regulation                                   |                   |                       |
|---|-------------------|-----------------------|
|   | FY 2020<br>Actual | FY 2021<br>Expd. Plan |
| FTE   | 1.0               | 1.0                   |
| Expenditure Category Total  | 1.0               | 1.0                   |
| Appropriated  |                   |                       |
| HE2041-A Homeopathic Medical Examiners (Appropriated)               | 1.0               | 1.0                   |
|   | 1.0               | 1.0                   |
| Fund Source Total   | 1.0               | 1.0                   |
|   |                   |                       |
| Personal Services   | 17.7              | 23.7                  |
| Boards and Commissions  | 0.0               | 0.0                   |
| Expenditure Category Total  | 17.7              | 23.7                  |
| Appropriated  |                   |                       |
| HE2041-A Homeopathic Medical Examiners (Appropriated)               | 17.7              | 23.7                  |
|   | 17.7              | 23.7                  |
| Fund Source Total   | 17.7              | 23.7                  |
| Tund Source Total   | 11.1              | 25.1                  |
| Employee Related Expenses   | 5.9               | 5.9                   |
| Expenditure Category Total  | 5.9               | 5.9                   |
| Appropriated  |                   |                       |
| HE2041-A Homeopathic Medical Examiners (Appropriated)               | 5.9               | 5.9                   |
|   | 5.9               | 5.9                   |
| Fund Source Total   |                   |                       |
| Fund Source Total   | 5.9               | 5.9                   |
| Professional and Outside Services                                   |                   | 0.0                   |
| External Prof/Outside Serv Budg And Appn                            | 0.0               |                       |
| External Investment Services  | 0.0               |                       |
| Other External Financial Services                                   | 0.0               |                       |
| Attorney General Legal Services                                     | 0.0               |                       |
| External Legal Services   | 0.0               |                       |
| External Engineer/Architect Cost - Exp                              | 0.0               |                       |
| External Engineer/Architect Cost- Cap                               | 0.0               |                       |
| Other Design  | 0.0               |                       |
| Temporary Agency Services   | 0.0               |                       |
| Hospital Services   | 0.0               |                       |
| Other Medical Services  | 0.0               |                       |
| Institutional Care  | 0.0               |                       |
| Education And Training  | 0.0               |                       |
| Vendor Travel   | 0.0               |                       |
| Professional & Outside Services Excluded from Cost Allocat          | 0.0               |                       |
| Vendor Travel - Non Reportable                                      | 0.0               |                       |
| External Telecom Consulting Services                                | 0.0               |                       |
| Costs related to those in custody of the State                      | 0.0               |                       |
| Non - Confidential Specialist Fees                                  | 0.0               |                       |
| Confidential Specialist Fees  | 0.0               |                       |
| Outside Actuarial Costs   | 0.0               |                       |
| Outside Actuarial Costs Other Professional And Outside Services     |                   |                       |
| Other Professional And Outside Services  Expenditure Category Total | 0.0               | 0.0                   |
| Expenditure dategory rotal  | 0.0               | 0.0                   |
|   |                   |                       |
|   | 0.0               | 0.0                   |

| Agency:              | Board of Homeopathic and Integrated Medic | ine Examiners     |                       |
|----------------------|---|-------------------|-----------------------|
| Program:             | Licensing and Regulation                  |                   |                       |
|                      |   | FY 2020<br>Actual | FY 2021<br>Expd. Plan |
|                      | Expenditure Category Total                | 0.0               | 0.0                   |
| Travel Out of State  |   | 0.0               | 0.0                   |
|                      | Expenditure Category Total                | 0.0               | 0.0                   |
| Food                 |   | 0.0               | 0.0                   |
|                      | Expenditure Category Total                | 0.0               | 0.0                   |
| Aid to Organization  | s and Individuals                         | 0.0               | 0.0                   |
|                      | Expenditure Category Total                | 0.0               | 0.0                   |
| Other Operating Ex   | rpenses                                   |                   | 17.0                  |
| Other Operating Ex   | penditures Budg Approp                    | 0.0               |                       |
|                      | penditures Excluded from Cost Allocati    | 0.0               |                       |
| =                    | Charges To State Agency                   | 1.1               |                       |
|                      | Deductible - Indemnity                    | 0.0               |                       |
| Risk Management I    |   | 0.0               |                       |
|                      | Deductible - Medical                      | 0.0               |                       |
| Risk Management I    |   | 0.0               |                       |
|                      | sical-Taxable- Self Ins                   | 0.0               |                       |
|                      | yments To Attorneys                       | 0.0               |                       |
|                      | on-Taxable- Self Ins                      | 0.0               |                       |
| Medical Malpractice  |   | 0.0               |                       |
| Automobile Liability |   | 0.0               |                       |
|                      | amage - Self- Insured                     | 0.0               |                       |
|                      | al Damage-Self Insured                    | 0.0               |                       |
| Liability Insurance  |   | 0.0               |                       |
| Property Insurance   |   | 0.0               |                       |
| · ·                  | ation Benefit Payments                    | 0.0               |                       |
| Self Insurance - Ad  |   | 0.0               |                       |
| Self Insurance - Pro |   | 0.0               |                       |
| Self Insurance - Cla |   | 0.0               |                       |
| Self Insurance - Ph  | -   | 0.0               |                       |
| Premium Tax On A     |   | 0.0               |                       |
| Other Insurance-Re   |   | 0.0               |                       |
| Internal Service Da  | _   | 0.2               |                       |
| Internal Service Da  | ,   | 0.0               |                       |
| =                    | ing-Mainframe/Legacy                      | 0.0               |                       |
|                      | ing- Pc/Lan/Serv/Web                      | 0.0               |                       |
| External Data Entry  |   | 0.0               |                       |
|                      | Proc-Mainframe/Legacy                     | 0.0               |                       |
|                      | Proc-Pc/Lan/Serv/Web                      | 0.0               |                       |
| Pmt for AFIS Devel   |   | 0.2               |                       |
| Internal Service Te  |   | 0.0               |                       |
|                      | ong Distance-In-State                     | 0.5               |                       |
|                      | ong Distance-Out-State                    | 0.0               |                       |
|                      | ecommunication Service                    | 0.0               |                       |
| Electricity          |   | 0.0               |                       |
| Sanitation Waste D   | isposal                                   | 0.0               |                       |

Agency: Board of Homeopathic and Integrated Medicine Examiners

Program: Licensing and Regulation

| Program. Licensing and Regulation        |                   |                       |
|--|-------------------|-----------------------|
|  | FY 2020<br>Actual | FY 2021<br>Expd. Plan |
| Water                                    | 0.0               |                       |
| Gas And Fuel Oil For Buildings           | 0.0               |                       |
| Other Utilities                          | 0.0               |                       |
| Building Rent Charges To State Agencies  | 8.0               |                       |
| Priv Lease To Own Bld Rent Chrgs To Agy  | 0.0               |                       |
| Cert Of Part Bld Rent Chrgs To Agy       | 0.0               |                       |
| Rental Of Land And Buildings             | 0.0               |                       |
| Rental Of Computer Equipment             | 0.0               |                       |
| Rental Of Other Machinery And Equipment  | 0.0               |                       |
| Miscellaneous Rent                       | 0.1               |                       |
| Interest On Overdue Payments             | 0.0               |                       |
| All Other Interest Payments              | 0.0               |                       |
| Internal Acct/Budg/Financial Svcs        | 6.0               |                       |
| Other Internal Services                  | 0.0               |                       |
| Repair And Maintenance - Buildings       | 0.0               |                       |
| Repair And Maintenance - Vehicles        | 0.0               |                       |
| Repair And Maint - Mainframe And Legacy  | 0.0               |                       |
| Repair And Maint-Pc/Lan/Serv/Web         | 0.0               |                       |
| Repair And Maintenance - Other Equipment | 0.0               |                       |
| Other Repair And Maintenance             | 0.0               |                       |
| Software Support And Maintenance         | 0.0               |                       |
| Uniforms                                 | 0.0               |                       |
| Inmate Clothing                          | 0.0               |                       |
| Security Supplies                        | 0.0               |                       |
| Office Supplies                          | 0.0               |                       |
| Computer Supplies                        | 0.0               |                       |
| Housekeeping Supplies                    | 0.0               |                       |
| Bedding And Bath Supplies                | 0.0               |                       |
| Drugs And Medicine Supplies              | 0.0               |                       |
| Medical Supplies                         | 0.0               |                       |
| Dental Supplies                          | 0.0               |                       |
| Automotive And Transportation Fuels      | 0.0               |                       |
| Automotive Lubricants And Supplies       | 0.0               |                       |
| Rpr And Maint Supplies-Not Auto Or Build | 0.0               |                       |
| Repair And Maintenance Supplies-Building | 0.0               |                       |
| Other Operating Supplies                 | 0.0               |                       |
| Publications                             | 0.0               |                       |
| Aggregate Withheld Or Paid Commissions   | 0.0               |                       |
| Lottery Prizes                           | 0.0               |                       |
| Lottery Distribution Costs               | 0.0               |                       |
| Material for Further Processing          | 0.0               |                       |
| Other Resale Supplies                    | 0.0               |                       |
| Loss On Sales Of Capital Assets          | 0.0               |                       |
| Loss on Sales of Investments             | 0.0               |                       |
| Employee Tuition Reimbursement-Graduate  | 0.0               |                       |
| Employee Tuition Reimb Under-Grad/Other  | 0.0               |                       |
| Conference Registration-Attendance Fees  | 0.0               |                       |
| Other Education And Training Costs       | 0.0               |                       |
| Advertising                              | 0.0               |                       |
| Sponsorships                             | 0.0               |                       |
| Internal Printing                        | 0.0               |                       |

Agency: Board of Homeopathic and Integrated Medicine Examiners

Program: Licensing and Regulation

| Program. Licensing and Regulation                            |                   |                       |
|--|-------------------|-----------------------|
|  | FY 2020<br>Actual | FY 2021<br>Expd. Plan |
| External Printing  | 0.0               |                       |
| Photography  | 0.0               |                       |
| Postage And Delivery   | 0.1               |                       |
| Document shredding and Destruction Services                  | 0.0               |                       |
| Translation and Sign Language Services                       | 0.0               |                       |
| Distribution To State Universities                           | 0.0               |                       |
| Other Intrastate Distributions                               | 0.0               |                       |
| Awards   | 0.0               |                       |
| Entertainment And Promotional Items                          | 0.0               |                       |
| Dues   | 0.0               |                       |
|  | 0.0               |                       |
| Books- Subscriptions And Publications                        |                   |                       |
| Costs For Digital Image Or Microfilm                         | 0.0               |                       |
| Revolving Fund Advances                                      | 0.0               |                       |
| Credit Card Fees Over Approved Limit                         | 0.0               |                       |
| Relief Bill Expenditures                                     | 0.0               |                       |
| Surplus Property Distr To State Agencies                     | 0.0               |                       |
| Security Services  | 0.5               |                       |
| Judgments - Damages  | 0.0               |                       |
| ICA Payments to Claimants Confidential                       | 0.0               |                       |
| Jdgmnt-Confidential Restitution To Indiv                     | 0.0               |                       |
| Judgments - Non-Confidential Restitution                     | 0.0               |                       |
| Judgments - Punitive And Compensatory                        | 0.0               |                       |
| Pmts Made to Resolve/Disputes/Avoid Costs of Litigation      | 0.0               |                       |
| Pmts For Contracted State Inmate Labor                       | 0.0               |                       |
| Payments To State Inmates                                    | 0.0               |                       |
| Bad Debt Expense   | 0.0               |                       |
| Interview Expense  | 0.0               |                       |
| Employee Relocations-Nontaxable                              | 0.0               |                       |
| Employee Relocations-Taxable                                 | 0.0               |                       |
| Non-Confidential Invest/Legal/Law Enf                        | 0.0               |                       |
| Conf/Sensitive Invest/Legal/Undercover                       | 0.0               |                       |
| Fingerprinting, Background Checks, Etc.                      | 0.0               |                       |
| Other Miscellaneous Operating                                | 0.0               |                       |
| Expenditure Category Total                                   | 16.7              | 17.0                  |
| Appropriated   |                   |                       |
| HE2041-A Homeopathic Medical Examiners (Appropriated)        | 16.7              | 17.0                  |
| TIEZO II A TIOTHEOPACHIC Ficultural Examiners (Appropriated) |                   |                       |
|  | 16.7              | 17.0                  |
| Fund Source Total  | 16.7              | 17.0                  |
| Current Year Expenditures                                    |                   | 0.0                   |
| Capital Equipment Budget And Approp                          | 0.0               |                       |
| Vehicles Capital Purchase                                    | 0.0               |                       |
| Vehicles Capital Leases                                      | 0.0               |                       |
| ·  | 0.0               |                       |
| Furniture Capital Purchase                                   |                   |                       |
| Depreciable Works Of Art & Hist Treas/Coll Capital Purcha    | 0.0               |                       |
| Non Depr Works Of Art & Hist Treas/Coll Cap Purchase         | 0.0               |                       |
| Furniture Capital Leases                                     | 0.0               |                       |
| Computer Equipment Capital Purchase                          | 0.0               |                       |
| Computer Equipment Capital Lease                             | 0.0               |                       |
| Telecommunication Equip-Capital Purchase                     | 0.0               |                       |
| Telecommunication Equip-Capital Lease                        | 0.0               |                       |

Agency: Board of Homeopathic and Integrated Medicine Examiners

Program: Licensing and Regulation

|                            |                                    | FY 2020<br>Actual | FY 2021<br>Expd. Plan |
|----------------------------|------------------------------------|-------------------|-----------------------|
| Other Equipment Capital F  | Purchase                           | 0.0               |                       |
| Other Equipment Capital L  | eases                              | 0.0               |                       |
| Purchased Or Licensed So   |                                    | 0.0               |                       |
| Internally Generated Softv | vare-Website                       | 0.0               |                       |
| Development in Progress    |                                    | 0.0               |                       |
| Right-Of-Way/Easement/E    | extraction Rights                  | 0.0               |                       |
|                            | d, licensed or internally generate | 0.0               |                       |
| Other intangible assets ac |                                    | 0.0               |                       |
| Other Capital Asset Purcha |                                    | 0.0               |                       |
| Leasehold Improvement-C    |                                    | 0.0               |                       |
| Other Capital Asset Leases |                                    | 0.0               |                       |
| Non-Capital Equip Budget   |                                    | 0.0               |                       |
| Vehicles Non-Capital Purch |                                    | 0.0               |                       |
| Vehicles Non-Capital Lease |                                    | 0.0               |                       |
| Furniture Non-Capital Puro |                                    | 0.0               |                       |
| Works Of Art And Hist Tre  |                                    | 0.0               |                       |
| Furniture Non-Capital Leas | •                                  | 0.0               |                       |
| Computer Equipment Non-    |                                    | 0.0               |                       |
| Computer Equipment Non-    |                                    | 0.0               |                       |
| Telecomm Equip Non-Cap     |                                    | 0.0               |                       |
|                            |                                    | 0.0               |                       |
| Telecomm Equip Non-Cap     |                                    | 0.0               |                       |
| Other Equipment Non-Cap    |                                    |                   |                       |
| Weapons Non-Capital Purc   |                                    | 0.0               |                       |
| Other Equipment Non-Cap    |                                    | 0.0               |                       |
| Purchased Or Licensed So   |                                    | 0.0               |                       |
| Internally Generated Softv | vare/Website                       | 0.0               |                       |
| LICENSES AND PERMITS       |                                    | 0.0               |                       |
| Right-Of-Way/Easement/E    | •                                  | 0.0               |                       |
|                            | Purchased, Licensed or Internall   | 0.0               |                       |
| Noncapital Software/Web    |                                    | 0.0               |                       |
| Other Intangible Assets Ad |                                    | 0.0               |                       |
| Other Long Lived Tangible  | Assets to be Expenses              | 0.0               |                       |
| Non-Capital Equipment Ex   | cluded from Cost Allocation        | 0.0               |                       |
|                            | Expenditure Category Total         | 0.0               | 0.0                   |
| Capital Outlay             |                                    | 0.0               | 0.0                   |
| /                          | Expenditure Category Total         | 0.0               | 0.0                   |
|                            |                                    |                   |                       |
| Debt Service               |                                    | 0.0               | 0.0                   |
|                            | <b>Expenditure Category Total</b>  | 0.0               | 0.0                   |
|                            |                                    |                   |                       |
| Cost Allocation            |                                    | 0.0               | 0.0                   |
| Cost / mocdeloff           | Expenditure Category Total         | 0.0               | 0.0                   |
| Transfers                  |                                    | 0.0               | 0.0                   |
| Transfers                  | Expanditure Category Total         | 0.0               | 0.0                   |
|                            | Expenditure Category Total         | 0.0               | 0.0                   |

**Employee Retirement Coverage** 

| Agency:  | Board of Homeopathic and Integrated Medicine Examiners |  |
|----------|--|--|
| Program: | Licensing and Regulation                               |  |

Retirement SystemFY 2020 FY 2021 Actual Expd. PlanRetirement SystemFTEServices Fund#Arizona State Retirement System0.023.7 HE2041-A

Combined Regular & Elected Positions At/Above FICA Maximum of \$142,800

| Total | Personal | FTE's not eligible for |
|-------|----------|------------------------|
| FTE   | Services | Health, Dental & Life  |
| 0.0   | 0.0      | 0.0                    |

Agency:

**Board of Homeopathic and Integrated Medicine Examiners** 

Date Printed: 9/2/2020 9:59:23 AM All dollars are presented in thousands (not FTE). Page 22

# Summary of Expenditure and Budget Request for All Funds

| Agency: Board of Homeopa          | thic and Integrated Medicine Exami | ners |     |                          |  |
|-----------------------------------|------------------------------------|------|-----|--------------------------|--|
| Appropriated                      | FY 2020<br>Actual                  |      |     | FY 2022<br>Total Request |  |
| Cost Center/Program:              |                                    |      |     |                          |  |
| Licensing and Regulation          | 40.3                               | 46.6 | 0.0 | 46.6                     |  |
|                                   | 40.3                               | 46.6 | 0.0 | 46.6                     |  |
| Expenditure Categories            |                                    |      |     |                          |  |
| FTE                               | 1.0                                | 1.0  | 0.0 | 1.0                      |  |
| Personal Services                 | 17.7                               | 23.7 | 0.0 | 23.7                     |  |
| Employee Related Expenses         | 5.9                                | 5.9  | 0.0 | 5.9                      |  |
| Professional and Outside Services | 0.0                                | 0.0  | 0.0 | 0.0                      |  |
| Travel In-State                   | 0.0                                | 0.0  | 0.0 | 0.0                      |  |
| Travel Out of State               | 0.0                                | 0.0  | 0.0 | 0.0                      |  |
| Food                              | 0.0                                | 0.0  | 0.0 | 0.0                      |  |
| Aid to Organizations and Individu | als 0.0                            | 0.0  | 0.0 | 0.0                      |  |
| Other Operating Expenses          | 16.7                               | 17.0 | 0.0 | 17.0                     |  |
| Equipment                         | 0.0                                | 0.0  | 0.0 | 0.0                      |  |
| Capital Outlay                    | 0.0                                | 0.0  | 0.0 | 0.0                      |  |
| Debt Service                      | 0.0                                | 0.0  | 0.0 | 0.0                      |  |
| Cost Allocation                   | 0.0                                | 0.0  | 0.0 | 0.0                      |  |
| Transfers                         | 0.0                                | 0.0  | 0.0 | 0.0                      |  |
| Expenditure Categories Total:     | 40.3                               | 46.6 | 0.0 | 46.6                     |  |

### **Summary of Expenditure and Budget Request** for All Funds

| Agency: Board of Homeopathic and Integrated Medicine Examiners |            |      |      |     |      |
|--|------------|------|------|-----|------|
| Agency Total for A   | All Funds: | 40.3 | 46.6 | 0.0 | 46.6 |

# **Summary of Expenditure and Budget Request** for Selected Funds

Agency: Board of Homeopathic and Integrated Medicine Examiners

Fund: HE2041 Homeopathic Medical Examiners (Appropriated)

|      |                                      | FY 2020<br>Actual | FY 2021<br>Expd. Plan | FY 2022<br>Fund. Issue | FY 2022<br>Total Request |
|------|--------------------------------------|-------------------|-----------------------|------------------------|--------------------------|
| Cost | Center/Program:                      |                   |                       |                        |                          |
| 1    | Licensing and Regulation             | 40.3              | 46.6                  | 0.0                    | 46.6                     |
|      |                                      | 40.3              | 46.6                  | 0.0                    | 46.6                     |
|      | Expenditure Categories               |                   |                       |                        |                          |
|      | FTE                                  | 1.0               | 1.0                   | 0.0                    | 1.0                      |
|      | Personal Services                    | 17.7              | 23.7                  | 0.0                    | 23.7                     |
|      | Employee Related Expenses            | 5.9               | 5.9                   | 0.0                    | 5.9                      |
|      | Professional and Outside Services    | 0.0               | 0.0                   | 0.0                    | 0.0                      |
|      | Travel In-State                      | 0.0               | 0.0                   | 0.0                    | 0.0                      |
|      | Travel Out of State                  | 0.0               | 0.0                   | 0.0                    | 0.0                      |
|      | Food                                 | 0.0               | 0.0                   | 0.0                    | 0.0                      |
|      | Aid to Organizations and Individuals | 0.0               | 0.0                   | 0.0                    | 0.0                      |
|      | Other Operating Expenses             | 16.7              | 17.0                  | 0.0                    | 17.0                     |
|      | Equipment                            | 0.0               | 0.0                   | 0.0                    | 0.0                      |
|      | Capital Outlay                       | 0.0               | 0.0                   | 0.0                    | 0.0                      |
|      | Debt Service                         | 0.0               | 0.0                   | 0.0                    | 0.0                      |
|      | Cost Allocation                      | 0.0               | 0.0                   | 0.0                    | 0.0                      |
|      | Transfers                            | 0.0               | 0.0                   | 0.0                    | 0.0                      |
|      | Expenditure Categories Total:        | 40.3              | 46.6                  | 0.0                    | 46.6                     |
| Fun  | d Total:                             | 40.3              | 46.6                  | 0.0                    | 46.6                     |

# **Summary of Expenditure and Budget Request** for Selected Funds

Agency: Board of Homeopathic and Integrated Medicine Examiners

Fund: HE2041 Homeopathic Medical Examiners (Appropriated)

|                                 | FY 2020 | FY 2021    | FY 2022     | FY 2022       |
|---------------------------------|---------|------------|-------------|---------------|
|                                 | Actual  | Expd. Plan | Fund. Issue | Total Request |
| Agency Total for Selected Funds | 40.3    | 46.6       | 0.0         | 46.6          |

### **Administrative Costs**

| Administrative Co | osts Summary                  |         |         |
|-------------------|-------------------------------|---------|---------|
|                   | Common Administrative Area    | FY 2021 |         |
|                   | Personal Services             | 0.0     |         |
|                   | ERE                           | 0.0     |         |
|                   | All Other                     | 0.0     |         |
|                   | Administrative Costs Total:   | 0.0     |         |
| Administrative Co | est / Total Expenditure Ratio | Request | Admin % |
|                   | FY 2021                       | 46.6    | 0.0%    |