# Department of Health

www.doh.dc.gov

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## Table HC0-1

					% Change
	FY 2023	FY 2024	FY 2025	FY 2026	from
Description	Actual	Actual	Approved	Proposed	FY 2025
OPERATING BUDGET	\$288,696,544	\$281,085,123	\$310,028,863	\$314,929,262	1.6
FTEs	612.4	800.0	826.9	842.4	1.9
CAPITAL BUDGET	\$249,296	\$0	\$22,756,239	\$0	-100.0
FTEs	0.0	0.0	0.0	0.0	N/A

The District of Columbia Department of Health (DOH) promotes health, wellness, and equity across the District, and protects the safety of residents, visitors, and those doing business in our nation's capital.

## **Summary of Services**

The Department of Health provides programs and services with the ultimate goal of reducing the burden of disease and improving opportunities for health and well-being for all District residents and visitors. DOH does this through a number of mechanisms that center around prevention, promotion of health, expanding access to health care, and increasing health equity. The department provides public health management and leadership through policy, planning, and evaluation; fiscal oversight; human resource management; grants and contracts management; information technology; government relations; risk management; communication and community relations; legal oversight; and facilities management. The DOH performance plan is based on three priority areas: (1) health and wellness promotion, (2) promoting health equity, and (3) public health systems enhancement.

## FY 2026 Proposed Gross Funds Operating Budget and FTEs, by Revenue Type

Table HC0-2 contains the proposed FY 2026 budget and proposed Full-Time Equivalents by revenue type compared to the FY 2025 approved budget. It also provides FY 2023 and FY 2024 actual data.

**Table HC0-2** (dollars in thousands)

		1	Dollars in	Thousan	ds			Fu	ıll-Time E	quivalen	ts	
	_	-			Change			_			Change	
	Actual	Actual	Approved	Proposed	from	%	Actual	Actual	Approved	Proposed	from	%
Appropriated Fund	FY 2023	FY 2024	FY 2025	FY 2026	FY 2025	Change*	FY 2023	FY 2024	FY 2025	FY 2026	FY 2025 C	hange
GENERAL FUND												
Local Funds	99,679	92,399	92,329	95,119	2,789	3.0	179.7	159.5	177.9	238.3	60.4	34.0
Special Purpose Revenue												
Funds	22,932	29,226	24,405	23,139	-1,266	-5.2	140.2	138.8	149.0	142.7	-6.4	-4.3
TOTAL FOR												
GENERAL FUND	122,611	121,625	116,734	118,257	1,523	1.3	320.0	298.4	326.9	381.0	54.0	16.5
FEDERAL												
RESOURCES												
Federal Payments	3,546	3,777	5,000	5,000	0	0.0	0.0	0.0	0.0	0.0	0.0	N/A
Federal Grant Funds	162,371	155,664	187,545	190,602	3,057	1.6	292.4	501.7	500.0	461.4	-38.6	-7.7
TOTAL FOR												
FEDERAL												
RESOURCES	165,917	159,441	192,545	195,602	3,057	1.6	292.4	501.7	500.0	461.4	-38.6	-7.7
PRIVATE FUNDS												
Private Grant Funds	169	19	750	1,070	320	42.7	0.0	0.0	0.0	0.0	0.0	N/A
TOTAL FOR						<u> </u>						
PRIVATE FUNDS	169	19	750	1,070	320	42.7	0.0	0.0	0.0	0.0	0.0	N/A
GROSS FUNDS	288,697	281,085	310,029	314,929	4,900	1.6	612.4	800.0	826.9	842.4	15.4	1.9

<sup>\*</sup>Percent change is based on whole dollars.

Note: If applicable, for a breakdown of each Grant (Federal and Private) and Special Purpose Revenue type, please refer to Schedule 80 Agency Summary by Revenue Source in the FY 2026 Operating Appendices located on the Office of the Chief Financial Officer's website.

In FY 2023, the Intra-District process that required duplicated budget in the agencies providing services (seller agencies) was eliminated and replaced by interagency projects. For more detailed information regarding the approved funding for interagency projects funded within this agency, please see **Appendix H, FY 2026 Interagency Budgets**, in the **Executive Summary, Volume 1.** 

# **FY 2026 Proposed Operating Budget, by Account Group**

Table HC0-3 contains the proposed FY 2026 budget at the Account Group level compared to the FY 2025 approved budget. It also provides FY 2023 and FY 2024 actual expenditures.

## Table HC0-3

(dollars in thousands)

					Change	
	Actual	Actual	Approved	Proposed	from	Percentage
Account Group	FY 2023	FY 2024	FY 2025	FY 2026	FY 2025	Change*
701100C - Continuing Full Time	49,785	51,021	65,241	68,215	2,974	4.6
701200C - Continuing Full Time - Others	19,713	18,817	18,648	18,816	168	0.9
701300C - Additional Gross Pay	1,135	978	0	0	0	N/A

Table HC0-3

(dollars in thousands)

					Change	
	Actual	Actual	Approved	Proposed	from	Percentage
Account Group	FY 2023	FY 2024	FY 2025	FY 2026	FY 2025	Change*
701400C - Fringe Benefits - Current Personnel	15,496	15,671	18,518	20,228	1,710	9.2
701500C - Overtime Pay	316	304	0	0	0	N/A
SUBTOTAL PERSONNEL SERVICES (PS)	86,445	86,791	102,406	107,259	4,852	4.7
711100C - Supplies and Materials	4,806	933	5,637	2,816	-2,821	-50.0
712100C - Energy, Communications and Building Rentals	13,989	14,957	15,352	15,986	634	4.1
713100C - Other Services and Charges	5,732	4,556	7,345	6,979	-366	-5.0
713101C - Security Services	377	396	53	636	583	1,098.6
713200C - Contractual Services - Other	67,892	66,297	71,864	99,981	28,117	39.1
714100C - Government Subsidies and Grants	107,221	105,555	106,182	77,165	-29,017	-27.3
715100C - Other Expenses	98	876	0	0	0	N/A
717100C - Purchases Equipment and Machinery	2,136	723	1,189	4,107	2,917	245.2
717200C - Rentals Equipment and Other	0	0	0	0	0	N/A
SUBTOTAL NONPERSONNEL SERVICES (NPS)	202,251	194,294	207,622	207,671	48	0.0
GROSS FUNDS	288,697	281,085	310,029	314,929	4,900	1.6

<sup>\*</sup>Percent change is based on whole dollars.

## FY 2026 Proposed Operating Budget and FTEs, by Division/Program and Activity

Table HC0-4 contains the proposed FY 2026 budget by division/program and activity compared to the FY 2025 approved budget. It also provides FY 2023 and FY 2024 actual data. For a more comprehensive explanation of divisions/programs and activities, please see the Division/Program Description section, which follows the table.

**Table HC0-4** (dollars in thousands)

	Dollars in Thousands						Full-Time Equivalents			
					Change					Change
	Actual	Actual	Approved	Proposed	from	Actual	Actual	Approved	Proposed	from
Division/Program and Activity	FY 2023	FY 2024	FY 2025	FY 2026	FY 2025	FY 2023	FY 2024	FY 2025	FY 2026	FY 2025
(AFO000) AGENCY										
FINANCIAL OPERATIONS										
(AFO002) Agency Accounting										
Services	1,054	1,282	1,383	1,534	151	8.1	11.8	11.0	12.0	1.0
(AFO003) Agency Budgeting and										
Financial Management Services	1,124	1,231	1,314	1,394	80	5.9	8.6	8.0	8.3	0.3
(AFO005) Agency /Cluster										
Financial Executive Administration										
Services	751	779	858	829	-28	4.0	5.2	5.0	4.7	-0.3
(AFO011) P-Card Clearing	0	96	0	0	0	0.0	0.0	0.0	0.0	0.0
SUBTOTAL (AFO000) AGENCY										
FINANCIAL OPERATIONS	2,930	3,389	3,555	3,758	203	18.0	25.6	24.0	25.0	1.0
(AMP000) AGENCY										
MANAGEMENT PROGRAM										
(AMP003) Communications	822	996	1,136	1,220	85	5.9	7.1	8.0	8.0	0.0
(AMP005) Contracting and										
Procurement	871	670	1,241	1,245	4	3.4	6.6	8.0	8.0	0.0
(AMP011) Human Resource										
Services	1,387	1,864	2,061	1,949	-112	8.6	14.2	16.0	13.0	-3.0

**Table HC0-4** (dollars in thousands)

		Dolla	rs in Thou	sands			Full-T	ime Equiv	alents			
					Change					Change		
	Actual		Approved	-	from	Actual		Approved	-	from		
Division/Program and Activity	FY 2023	FY 2024	FY 2025	FY 2026	FY 2025	FY 2023	FY 2024	FY 2025	FY 2026	FY 2025		
(AMP012) Information Technology												
Services	6,405	5,289	8,290	8,651	361	14.2	30.7	30.0	29.9	-0.1		
(AMP013) Labor Relations	115	116	171	169	-2	1.0	1.0	1.0	1.0	0.0		
(AMP014) Legal Services	2,294	2,597	2,702	2,718	16	14.0	13.8	14.0	14.0	0.0		
(AMP019) Property, Asset, and												
Logistics Management	16,404	17,208	16,991	17,088	96	6.3	5.4	4.0	4.0	0.0		
(AMP024) Risk Management	125	129	132	136	4	0.7	1.1	1.0	1.0	0.0		
(AMP030) Executive												
Administration	4,242	1,605	1,705	2,253	549	7.7	10.6	10.0	13.0	3.0		
SUBTOTAL (AMP000) AGENCY												
MANAGEMENT PROGRAM	32,666	30,475	34,429	35,430	1,001	61.8	90.4	92.0	91.9	-0.1		
(HS0004) COMMUNITY												
HEALTH SERVICES												
(H00401) Cancer and Chronic												
Disease Prevention	11,384	10,528	12,327	11,125	-1,203	25.4	31.1	34.5	38.0	3.5		
(H00403) Community of Health												
Support Services	7,367	9,125	9,118	9,538	420	18.1	24.1	28.0	39.0	11.0		
(H00405) Family Health	41,757	36,767	41,874	39,692	-2,182	30.0	29.4	32.2	84.4	52.2		
(H00406) Health Care Access	20,091	20,599	10,362	7,415	-2,947	28.0	58.0	52.4	29.5	-22.9		
(H00407) Nutrition and Physical												
Fitness	22,256	21,814	23,243	27,146	3,903	13.1	20.9	20.0	19.4	-0.6		
(H00408) Perinatal and Infant												
Health	167	265	335	0	-335	1.0	3.0	2.8	0.0	-2.8		
(H00409) PCPA Support Services	98	0	0	0	0	0.0	0.0	0.0	0.0	0.0		
SUBTOTAL (HS0004)												
COMMUNITY HEALTH												
SERVICES	103,120	99,098	97,260	94,916	-2,344	115.6	166.5	169.9	210.3	40.5		
(HS0006) FOOD, DRUG,												
RADIATION AND												
COMMUNITY HYGIENE												
PROGRAM												
(H00601) Food, Drug, Radiation,												
and Community Hygiene	14,548	13,695	13,990	0	-13,990	60.1	50.2	70.8	0.0	-70.8		
SUBTOTAL (HS0006) FOOD,												
DRUG, RADIATION AND												
COMMUNITY HYGIENE												
PROGRAM	14,548	13,695	13,990	0	-13,990	60.1	50.2	70.8	0.0	-70.8		
(HS0007) HEALTH EQUITY												
SERVICES												
(H00701) Community Based												
Partnership, Research and Policy												
Evaluation	43	0	255	260	5	1.4	2.2	2.0	2.0	0.0		
(H00702) Health Equity Practice												
and Program Implementation	125	8	12	12	0	0.7	1.1	0.0	0.0	0.0		
(H00703) Multi Sector												
Collaboration	478	497	695	1,102	407	2.3	4.3	4.0	7.0	3.0		
SUBTOTAL (HS0007) HEALTH												
EQUITY SERVICES	646	505	962	1,375	412	4.4	7.6	6.0	9.0	3.0		

**Table HC0-4** (dollars in thousands)

-		Dolla	rs in Thou	sands			Full-T	ime Equiv	alents	
					Change					Change
	Actual		Approved	-	from	Actual		Approved	-	from
Division/Program and Activity	FY 2023	FY 2024	FY 2025	FY 2026	FY 2025	FY 2023	FY 2024	FY 2025	FY 2026	FY 2025
(HS0008) HIV/AIDS,										
HEPATITIS, STD, AND TB										
PREVENTION										
(H00801) Direct Care Services For										
Tuberculosis	2,058	1,920	2,005	1,765	-241	6.2	9.3	11.4	10.0	-1.4
(H00802) Drug Assistance	12,124	9,367	10,782	13,011	2,229	14.2	13.2	10.5	10.3	-0.2
(H00803) Grants and Contracts										
Management	1,592	1,457	1,699	944	-755	6.0	14.8	12.0	7.4	-4.6
(H00804) HIV Health and Support										
Services	36,937	38,197	38,162	39,797	1,634	61.2	38.4	33.3	44.5	11.2
(H00805) HIV/Aids Data and										
Research	2,038	2,490	3,992	3,682	-309	11.7	17.1	13.8	18.2	4.4
(H00806) HIV/Aids Housing and										
Supportive Services	11,863	12,098	13,980	13,522	-459	2.8	4.4	7.7	4.6	-3.1
(H00807) HIV/Aids Policy and										
Planning	4,008	4,815	6,126	2,645	-3,481	16.6	23.7	28.4	13.6	-14.8
(H00808) Prevention and										
Intervention Services	11,238	11,647	12,334	9,924	-2,410	20.1	20.0	20.2	14.6	-5.6
(H00809) STD Control	3,486	2,686	3,169	2,384	-785	17.1	20.6	24.1	18.9	-5.2
SUBTOTAL (HS0008) HIV/AIDS,										
HEPATITIS, STD, AND TB										
PREVENTION	85,344	84,676	92,250	87,674	-4,576	155.8	161.4	161.5	142.2	-19.4
(HS0009) MEDICAL AND										
PUBLIC HEALTH										
EMERGENCIES										
(H00902) Public Health Emergency										
Operations and Program Support	7,573	5,828	4,800	0	-4,800	16.9	31.8	28.4	0.0	-28.4
(H00903) Public Health Emergency										
Preparedness	2,023	2,222	1,481	0	-1,481	5.1	2.9	3.4	0.0	-3.4
SUBTOTAL (HS0009)										
MEDICAL AND PUBLIC										
HEALTH EMERGENCIES	9,596	8,049	6,281	0	-6,281	22.1	34.8	31.9	0.0	-31.9
(HS0011) OFFICE OF HEALTH										
CARE FACILITIES										
(H01101) Health Care Facilities										
Regulation	6,217	6,200	7,373	0	-7,373	49.8	56.0	49.8	0.0	-49.8
SUBTOTAL (HS0011) OFFICE										
OF HEALTH CARE						40.0	<b>-</b> < 0	40.0		40.0
FACILITIES TO A PROPERTY OF THE PARTY OF THE	6,217	6,200	7,373	0	-7,373	49.8	56.0	49.8	0.0	-49.8
(HS0012) PROFESSIONAL										
LICENSING	12 000	10.004	12 500	0	12.500	74.6	75 1	02.4	0.0	02.4
(H01201) Health Licensing	13,808	18,094	12,599	0	-12,599	74.6	75.1	82.4	0.0	-82.4
SUBTOTAL (HS0012)	13,808	18,094	12,599	0	-12,599	74.6	75.1	82.4	0.0	-82.4
PROFESSIONAL LICENSING	13,008	10,094	12,599	U	-12,399	/4.0	/5.1	02.4	0.0	-04.4

**Table HC0-4** (dollars in thousands)

		Dolla	ırs in Thou	sands		Full-Time Equivalents				
Division/Program and Activity	Actual FY 2023	Actual FY 2024	Approved FY 2025	Proposed FY 2026	Change from FY 2025	Actual FY 2023	Actual FY 2024	Approved FY 2025	Proposed FY 2026	Change from FY 2025
(HS0013) REGULATORY										
OVERSIGHT OF EMERGENCY										
MEDICAL SERVICES										
(H01301) Emergency Medical										
Services Regulation	106	17	303	0	-303	2.0	0.1	1.1	0.0	-1.1
SUBTOTAL (HS0013)										
REGULATORY OVERSIGHT										
OF EMERGENCY MEDICAL										
SERVICES	106	17	303	0	-303	2.0	0.1	1.1	0.0	-1.1
(HS0014) RESEARCH										
EVALUATION AND										
MEASUREMENT										
(H01401) Epidemiologic Studies										
and Outbreak Investigation	6,971	758	3,314	0	-3,314	1.7	10.8	12.4	0.0	-12.4
SUBTOTAL (HS0014)			<i>/-</i> -		, , , , , , , , , , , , , , , , , , ,					
RESEARCH EVALUATION										
AND MEASUREMENT	6,971	758	3,314	0	-3,314	1.7	10.8	12.4	0.0	-12.4
(HS0015) STATE HEALTH	•		-		•					
PLANNING AND										
DEVELOPMENT										
(H01501) Development of the State										
Health Plan and Annual										
Implementation	1,458	1,301	1,796	0	-1,796	9.5	9.2	9.5	0.0	-9.5
SUBTOTAL (HS0015) STATE										
HEALTH PLANNING AND										
DEVELOPMENT	1,458	1,301	1,796	0	-1,796	9.5	9.2	9.5	0.0	-9.5
(HS0016) STATE HEALTH										
STATISTICS										
(H01601) Birth and Death Record										
Collection, Processing, Analyzing										
and Dissemination	11,278	15,070	35,916	0	-35,916	37.0	112.4	115.7	0.0	-115.7
SUBTOTAL (HS0016) STATE										
HEALTH STATISTICS	11,278	15,070	35,916	0	-35,916	37.0	112.4	115.7	0.0	-115.7
(HS0059) HEALTH SYSTEMS										
AND PREPAREDNESS										
(H02031) Finance and Grants -										
Health Systems and Preparedness	0	0	0	674	674	0.0	0.0	0.0	5.0	5.0
(H02032) Health and Medical										
Coalition	0	0	0	1,116	1,116	0.0	0.0	0.0	1.0	1.0
(H05404) Health Licensing - FY26	0	0	0	14,317	14,317	0.0	0.0	0.0	77.6	77.6
(H05405) Health Care Facilities										
Regulation - FY26	0	0	0	6,981	6,981	0.0	0.0	0.0	46.5	46.5
(H05406) Public Health Emergency										
Operations and Program Support -										
FY26	0	0	0	3,927	3,927	0.0	0.0	0.0	19.6	19.6
(H05407) Emergency Medical										
Services Regulation - FY26	0	0	0	1,411	1,411	0.0	0.0	0.0	5.4	5.4
(H05408) Public Health Planning,										
Training and Exercise - FY26	0	0	0	222	222	0.0	0.0	0.0	1.6	1.6
SUBTOTAL (HS0059) HEALTH										
SYSTEMS AND										
PREPAREDNESS	0	0	0	28,648	28,648	0.0	0.0	0.0	156.5	156.5

**Table HC0-4** (dollars in thousands)

		Dolla	rs in Thou	sands		Full-Time Equivalents				
					Change			•		Change
	Actual	Actual	Approved	Proposed	from	Actual	Actual	Approved	Proposed	from
Division/Program and Activity	FY 2023	FY 2024	FY 2025	FY 2026	FY 2025	FY 2023	FY 2024	FY 2025	FY 2026	FY 2025
(HS0060) ENVIRONMENTAL										
HEALTH SERVICES										
(H02034) Indoor Environment	0	0	0	1,574	1,574	0.0	0.0	0.0	13.0	13.0
(H02035) Outdoor Environment	0	0	0	328	328	0.0	0.0	0.0	3.0	3.0
(H02036) Food Sanitation	0	0	0	2,499	2,499	0.0	0.0	0.0	22.0	22.0
(H02037) Community Hygiene	0	0	0	554	554	0.0	0.0	0.0	5.0	5.0
(H02038) Animal Services	0	0	0	10,318	10,318	0.0	0.0	0.0	15.0	15.0
(H02039) Rodent and Vector										
Control	0	0	0	2,108	2,108	0.0	0.0	0.0	20.0	20.0
(H02040) Policy and Planning -										
Environmental Health Services	0	0	0	362	362	0.0	0.0	0.0	2.0	2.0
(H02041) Finance and Grants -										
Environmental Health Services	0	0	0	550	550	0.0	0.0	0.0	3.0	3.0
SUBTOTAL (HS0060)										
ENVIRONMENTAL HEALTH										
SERVICES	0	0	0	18,294	18,294	0.0	0.0	0.0	83.0	83.0
(HS0061) POLICY, PLANNING,										
AND EVALUATION										
(H02027) Policy and Planning	0	0	0	466	466	0.0	0.0	0.0	2.0	2.0
(H02028) Data Management and										
Analysis	0	0	0	1,534	1,534	0.0	0.0	0.0	12.0	12.0
(H02029) Informatics	0	0	0	648	648	0.0	0.0	0.0	5.0	5.0
(H02030) Finance and Grants -										
Policy, Planning, and Evaluation	0	0	0	976	976	0.0	0.0	0.0	7.0	7.0
(H05401) Epidemiologic Studies										
and Outbreak Investigation - FY26	0	0	0	36,978	36,978	0.0	0.0	0.0	71.0	71.0
(H05402) Birth and Death Record					,					
Collection, Processing, Analyzing										
and Dissemination	0	0	0	2,940	2,940	0.0	0.0	0.0	22.0	22.0
(H05403) Development of the State					,					
Health Plan and Annual										
Implementation - FY26	0	0	0	1,295	1,295	0.0	0.0	0.0	5.5	5.5
SUBTOTAL (HS0061) POLICY,				,	,					
PLANNING, AND										
EVALUATION	0	0	0	44,835	44,835	0.0	0.0	0.0	124.5	124.5
(PRG000) NO PROGRAM					,					
(PRG001) No Program	7	-244	0	0	0	0.0	0.0	0.0	0.0	0.0
SUBTOTAL (PRG000) NO										
PROGRAM	7	-244	0	0	0	0.0	0.0	0.0	0.0	0.0
TOTAL PROPOSED										
OPERATING BUDGET	288,697	281,085	310,029	314,929	4,900	612.4	800.0	826.9	842.4	15.4

(Change is calculated by whole numbers and numbers may not add up due to rounding)

Note: For more detailed information regarding the proposed funding for the activities within this agency's programs, please see Schedule 30-PBB Program Summary by Activity. For detailed information on this agency's Cost Center structure as reflected in the District's Chart of Accounts, please see Schedule 30-CC FY 2026 Proposed Operating Budget and FTEs, by Division/Office. The schedules can be found in the FY 2026 Operating Appendices located on the Office of the Chief Financial Officer's website. Additional information on this agency's interagency agreements can be found in Appendix H in the Executive Summary, Volume 1.

## **Division Description**

The Department of Health operates through the following 8 divisions:

Community Health Services – located within the Community Health Administration (CHA), this program promotes healthy behaviors. CHA focuses on nutrition and physical fitness promotion; cancer and chronic disease prevention and control; access to quality health care services, particularly medical and dental homes; and the health of families across the lifespan. CHA's approach targets the behavioral, clinical, and social determinants of health through evidence-based programs, policy, and systems change.

This division contains the following 5 activities:

- Cancer and Chronic Disease Prevention develops, implements and evaluates programs and policy aimed at preventing and controlling the leading causes of death in the District. The Bureau implements cancer control and prevention initiatives aimed at reducing the high rates of cancer-related mortality among District residents. Its programs target treatable or preventable cancers, such as breast, cervical, lung, and colorectal, through primary and secondary prevention. The Bureau also works to reduce the impact of chronic conditions such as cardiovascular disease, hypertension, and diabetes mellitus, by developing innovative management approaches and building community partnerships. It supports clinical quality improvement initiatives, which include developing decision support tools and participating in the design of clinical delivery systems, and it provides expert technical assistance to clinical and community settings around best practices for chronic disease prevention and management. The Bureau implements social marketing campaigns to change social norms and introduces long-lasting protective interventions, like cancer screening and tobacco cessation and treatment programs. The Bureau also helps strengthen the infrastructure for chronic disease care and promotes population-based policy strategies to reduce the common risk factors for chronic disease, including tobacco use, poor nutrition, and physical inactivity;
- Community of Health Support Services provides overall oversight of all programs and operations of CHA. The Bureau provides strategic direction for the administration and represents the agency within the District government and to community stakeholders. It sets priorities for administration activities and lead policy development, planning, and operational management. It also includes program support services, whose purpose is to ensure efficient and effective daily operations across the administration through the development, implementation, execution, and review of all administrative functions and policies, including administration-specific human resources, information technology, facilities, and customer service activities; a grant and budget monitoring unit, whose purpose is to uniformly address all of the administration's fiscal duties, including responsibility for the development of, oversight over the execution of, and reporting of the fiscal year budget; provision of support for all local and grant-funded Administration programs; procurement, monitoring, and evaluation for all non-personnel activities, such as contracts, memoranda of understanding, and sub-grants; implementation of comprehensive strategic fiscal plans to include allocation of personnel costs across all administration funding sources; and a program evaluation unit, whose purpose is to collaborate with program and fiscal staff to ensure effective and efficient performance of sub grantees. Program analysts will review and provide ongoing feedback on performance metrics and process and outcome measures to program staff and sub grantees, provide technical assistance around evaluation and measurement, and advise on performance improvement activities. They will work closely with grant monitors as well as program staff to ensure positive impact of funded initiatives. A Deputy Director of Programs and Policy (DDPP) unit leads the activities of CHA that address the determinants of health in the District of Columbia. The DDPP oversees implementation of evidence-based programs and policies to prevent illness and injury, promote healthy behaviors and healthy environments across the lifespan, improve access to medical and dental homes, and foster clinical quality improvement and innovation. The DDPP ensures that CHA programs follow best practices and are aligned with the core public health functions and essential services. The DDPP serves as the Title V Maternal and Child Health Block Grant Director and oversees the four programmatic bureaus within CHA: the Cancer and Chronic Disease Prevention Bureau, the Nutrition and Physical Fitness Bureau, the Health Care Access Bureau, and the Family Health Bureau;

- Family Health works to improve perinatal, early childhood, and child and adolescent health outcomes so that every child in the District of Columbia is healthy and able to thrive in school and beyond. The Bureau supports the development of a coordinated, culturally competent, family-centered health care delivery system; promotes community and clinical linkages for women, parents, children and adolescents; and works to align and integrate services to connect District families with the resources they need. It also provides expert technical assistance and builds the capacity of clinical and community-based organizations to deliver evidence-based practices and innovative programs in perinatal, early childhood, child, and adolescent health directly in communities. In addition, the Bureau facilitates school-based health care services and coordinates with education partners to implement policies and programs that support healthy school environments that support the whole child;
- Health Care Access supports population-based programs to improve access to quality primary care services for residents. The Bureau works to support and promote medical and dental facilities so that all residents can access comprehensive preventive medical and dental services. The Bureau administers the State Oral Health Program, the Immunization program including its Vaccines for Children program and the immunization registry, and health care workforce development programs. By administering the District's Health Professional Shortage Areas and Medically Underserved Area programs, the Bureau is a key component of the District's health planning infrastructure. The Bureau also supports innovations in primary care service delivery and quality, diffusion of primary care access to underserved communities, and linkages to primary care services regardless of the resident's ability to pay. The Bureau also ensures that underserved populations maintain access and linkages to healthcare services and the services provided by other CHA bureaus; and
- Nutrition and Physical Fitness promotes health and reduces obesity among District residents by encouraging behavioral change through direct nutrition and physical activity education and by facilitating policy, systems, and environmental changes that make healthy choices the easy choice in every community. The Bureau administers programs that supply food or funds for food such as the Supplemental Nutrition Assistance Program, Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), the Produce Plus Program, pop-up community markets, and other programs to impact socioeconomic factors that influence access to healthy foods. The Bureau also provides food, health and nutrition assessments and intervention, as well as education and counseling aimed at improving dietary habits and overall nutrition. Nutritional support is coupled with programs to promote physical activity and to decrease obesity.

**Health Equity Services** – located within the Office of Health Equity (OHE), this program works to address the root cause of health disparities, beyond health care, and health behaviors by supporting projects, policies and research that will enable every resident to achieve their optimal level of health. The Office achieves its mission by informing, educating, and empowering people about health issues and facilitating multi-sector partnerships to identify and solve community health problems related to the social determinants of health. As the newest division of DOH, this Office is charged with providing leadership to the evidence-based paradigm and practice change efforts essential to promoting and achieving health equity, including practitioners not only within DOH, but across District government, as well as with other public, private and non-profit entities, including community residents.

This division contains the following 3 activities:

• Community Based Partnership, Research and Policy Evaluation – located within Health Regulation Licensing and Administration (HRLA), this program provides data-driven and evidence-based research methods, tools and practices, including Geographic Information Systems (GIS) and other innovative methodologies, to measure social determinant and population health outcomes, including current and projected opportunities for health, disparate outcomes, and inequities by socioeconomic and demographic subpopulation and geographic location. This core function includes support for design, development and implementation of Health Equity Programs and their evaluation, including community-based participatory research, and publication of reports that inform the policy-making process as well as building the evidence base;

- **Health Equity Practice and Program Implementation** develops and delivers selected programs and initiatives with demonstrable strategic health-equity 'nexus' and operationalization potential, to contribute to and inform the essential paradigm shift in policy and practice to improve population health and promote more equitable opportunities for health, especially amongst vulnerable populations; and
- Multi Sector Collaboration provides informed, data-driven and evidence-based leadership in convening and sustaining effective multi-sector collaborative partnerships essential to promote and achieve health equity; uses a "health in all policies" (HIAP) approach to improving community health; and serves as liaison and technical advisor to all DOH Administrations regarding health equity, as well as to external District government agencies and private partners.

HIV/AIDS, Hepatitis, STD, and TB Prevention – partners with health and community-based organizations to provide HIV/AIDS, hepatitis, STD, and TB prevention and care services. Services include prevention tools and interventions, medical care and supportive services, housing services for persons living with HIV/AIDS, HIV counseling and testing, and data and information on disease-specific programs and services. Furthermore, the administration provides information on the impact of these diseases on the community as well as education, referrals, and intervention services. The AIDS Drug Assistance Program (ADAP) provides drugs at no cost to eligible District residents who are HIV-positive or have AIDS. HAHSTA administers the District's budget for HIV/AIDS, hepatitis, STD, and TB programs; provides grants to service providers; provides direct services for TB and STDs; monitors programs; and tracks the rates of HIV, hepatitis, STDs, and TB in the District of Columbia.

This division contains the following 9 activities:

- **Direct Care Services for Tuberculosis** provides direct care services to District residents, including clinical follow-up for active and/or suspected tuberculosis cases, directly observed therapy, preventive therapy, chest x-rays, contact investigations, and case management;
- Drug Assistance provides assistance with deductibles, co-payments, and health insurance/Medicare
  Part D premiums. DC ADAP also provides an entry point for other District health programs available to
  people living with HIV/AIDS;
- **Grants and Contracts Management** provides fiscal and administrative monitoring of District and federally appropriated funds in the form of over 100 grants and sub-grants to more than 50 providers. Fiscal monitoring includes ensuring that grant funds are expended in accordance with federal and local grant regulations, conducting site visits, providing technical assistance to grantees and sub-grantees, and providing continued analysis of grant spending to program counterparts;
- **HIV Health and Support Services** provides a comprehensive range of primary medical care and supportive services for persons living with HIV and AIDS;
- HIV/AIDS Data and Research provides a comprehensive picture of the HIV/AIDS epidemic in the District of Columbia for purposes of ensuring that the needs of people infected with HIV, or at risk of infection, are met. It collaborates with healthcare providers and laboratories to collect and maintain comprehensive HIV/AIDS data in a confidential and secure manner; analyzes, interprets, and distributes epidemiologic information for use in developing public policy, planning, and evaluating prevention intervention and health care services; and supports funding requests;
- **HIV/AIDS Housing and Supportive Services** provides housing support, emergency shelter, and other related services to help persons living with HIV and AIDS and their families achieve independent living;
- **HIV/AIDS Policy and Planning** provides community capacity to respond to the HIV/AIDS and STD epidemics through the Effi Barry program, which provides training and technical assistance to small, ward-based community organizations, a social marketing program aiming to promote healthy behaviors to reduce risk of disease, and a free condom distribution program. It writes reports and creates other written materials for public distribution; and it provides HIV/AIDS, STD, TB, and hepatitis information to government agencies, community organizations, media, and individuals. It also coordinates participation in public events;

- **Prevention and Intervention Services** provides comprehensive HIV prevention programs and services through community organizations to the residents of the District of Columbia. Prevention programs include health education, HIV testing and counseling services, science-based prevention programs, and other support services, including condom distribution. In addition, the program monitors organizations to ensure that quality prevention services are being delivered through program evaluation and quality assurance activities as well as through the provision of capacity building, training, and technical assistance to sub-grantees; and
- **Sexually Transmitted Disease (STD) Control** provides assistance to prevent and control sexually transmitted diseases in the District of Columbia through the provision of clinical services, partnerships with local community providers, and promotion of healthy sexual behavior. The program also conducts surveillance for statistical purposes to track diseases and partner notification.

**Health Systems and Preparedness** – This administration supports the steady state and emergent operations of the healthcare system within the District of Columbia. A core component is to provide regulatory oversight of healthcare professionals and entities operating within the District of Columbia. This administration supports the Department, healthcare system, and the public in public health emergency preparedness, resiliency, response, and recovery activities to ensure continuity of services and the well-being and health of residents of and visitors to the District of Columbia.

This division contains the following 7 activities:

- Finance and Grants Health Systems and Preparedness administers and manages the financial resources and grants to enhance health infrastructure and public health preparedness. This role ensures efficient allocation of federal, state, and local funds to support essential health services and emergency response capacity. Key functions include budgeting, financial oversight, and compliance, as well as overseeing grant application, distribution, and monitoring processes for health departments and community organizations. In times of public health emergencies, the division mobilizes funds quickly to support rapid response efforts. It also tracks fund utilization and program outcomes to report the impact of financial support on health systems and preparedness, while providing technical assistance and training to health organizations in financial management and compliance. This work is crucial for building resilient health systems and communities prepared to face public health threats;
- Health and Medical Coalition this activity, guided by CDC requirements brings together a network of healthcare organizations, public health agencies, emergency responders, and community partners to strengthen local and regional health response capabilities. This coalition coordinates resources, communication, and planning efforts to ensure an organized, community-wide response to public health emergencies. Key responsibilities include assessing community health needs, maintaining inventories of medical supplies and equipment, and developing surge capacity plans for hospitals and healthcare providers. The coalition also conducts joint training exercises, fosters interagency communication, and ensures compliance with CDC preparedness guidelines. By promoting collaboration and readiness across sectors, the Health and Medical Coalition enhances the resilience of healthcare systems and prepares communities for effective, unified responses to public health threats;
- **Health Licensing** administers the licensure of almost 70,000 health professionals in the District of Columbia supporting 19 health professional boards. The Office also executes the investigation of consumer incidents or complaints against health professionals and recommends enforcement, if necessary, to bring licensees into compliance with District and federal law. The health professional boards advise the Department of Health in matters pertaining to the development of rules and regulations for health professionals and provide additional services, including licensure verification and licensure examinations;

- Health Care Facilities Regulation administers all District and federal laws and regulations governing the licensure, certification and regulation of all health care facilities in the District of Columbia. In this role, HSPA staff inspects health care facilities and providers who participate in the Medicare and Medicaid programs, responds to consumer and self-reported facility incidents and/or complaints, and conducts investigations, if indicated. When necessary, HPSA takes enforcement actions to compel facilities, providers, and suppliers to come into compliance with District and federal law;
- Public Health Emergency Operations and Program Support coordinates and manages responses to public health emergencies, such as disease outbreaks, natural disasters, and other crises. This activity is associated with all programs that lead the planning, preparedness, and operational support necessary for an effective and rapid response to emergencies, ensuring that critical health resources and services are available to affected communities. Its responsibilities include coordinating across government agencies, healthcare providers, and community organizations to deploy resources, personnel, and medical supplies where needed. The program also establishes and maintains emergency communication systems, conducts training exercises, and provides logistical support to enhance response efficiency. Through continuous readiness efforts, the program aims to protect public health, reduce risks, and build resilience against future health threats;
- Emergency Medical Services Regulation provides oversight and regulation of Emergency Medical Services (EMS), including certification and regulation of District of Columbia EMS providers, ambulance agencies, and EMS educational institutions. The program monitors training standards and certifies instructional programs and instructors. In addition, it provides inspection and certification of all ambulances operated in the District whether they are governmental, private, or volunteer; and
- Public Health Planning, Training, and Exercise strengthens public health preparedness by developing comprehensive emergency plans, conducting training, and organizing simulation exercises. This activity ensures that programs in support of public health professionals, healthcare providers, and emergency responders are equipped with the knowledge and skills needed for effective crisis response. Its responsibilities include creating detailed response plans for a variety of health emergencies, coordinating training sessions on response protocols and safety procedures, and running large-scale drills and exercises to test readiness. This includes activities related to fostering interagency collaboration and refining response strategies, the program enhances public health resilience, ensuring that communities and responders are well-prepared to manage potential health crises.

**Environmental Health Services** - this program provides varied inspection and regulatory services on covered environmental health domains including food services, community sanitation, animal care and control, and lead services.

This division contains the following 8 activities:

• Indoor Environment - The Healthy Housing Program, previously located within the Department of Energy and Environment (DOEE), will now be housed within the Division of Indoor Environment. This program aims to reduce and eliminate environmental hazards—such as lead, climate-related issues, ventilation, pests, and structural concerns—within homes. The Healthy Housing Program encompasses both the Childhood Lead Poisoning Prevention Program (CLPPP) and the Healthy Homes initiative. CLPPP receives grant funding from the Centers for Disease Control and Prevention (CDC) to monitor and investigate cases of elevated blood lead levels in children under the age of six. The program also conducts year-round outreach focused on the importance of lead screening. The "Twice by Two" campaign informs and educates physicians on lead screening and reporting laws while encouraging parents to take their children to their pediatricians for screenings. In addition to these efforts, the Division of Indoor Environment will provide a range of services, including lead education and outreach, case management for families exposed to lead, carbon monoxide education and detectors, and prescription drug disposal. These initiatives will contribute to a safer and healthier indoor living environment for all District residents;

- Outdoor Environment— The Division of Outdoor Environment is responsible for monitoring, conducting research, providing education and outreach, and implementing recommendations and interventions related to workplace and occupational health, environmental hazards, and climate adaptation. Key focus areas include managing smoking exemptions, enforcing smoking regulations, and addressing non-medical radiation. The Division of Outdoor Environment will play a crucial role in promoting a healthier outdoor environment, ensuring the safety and well-being of residents in their workplaces and communities, while also addressing the impacts of climate change;
- **Food Sanitation** The Division of Food regulates food services that are provided in boarding homes, commission merchants, dairies, delicatessens, bakeries, candy and ice cream manufacturers, grocery stores, retail markets, restaurants, wholesale markets, mobile vendors, and hotels;
- Community Hygiene The Division of Community Hygiene regulates businesses including but not limited to, Barbershops, Cosmetology or Personal Grooming establishments, Nail Salons, Aquatic Facilities or Bedding/Upholstery establishments in Washington, D.C.:
- Animal Services— The Division of Animal Services provides the investigation of bite cases, issuance of dog and cat licenses, vaccinations, animal adoptions, spay and neutering, dead animal pick-up, and dangerous dog control services in the District;
- Rodent and Vector Control—The Division of Rodent and Vector Control provides a comprehensive, sustainable and responsive rodent control and animal disease prevention program. This program uses an integrated approach that includes community outreach, surveys, abatement, enforcement and cooperation with other District agencies to protect human health and the environment;
- Policy and Planning Environmental Health Services—provides capacity to respond to environmental health issues in the District of Columbia through training and technical assistance, social media marketing, legislation, development written materials for public distribution and coordination of participation in public events; and
- **Finance and Grants Environmental Health Services** provides fiscal and administrative monitoring of District and federally appropriated funds ensuring that funds are expended in accordance with federal and local grant regulations.

**Policy, Planning, and Evaluation (CPPE)** - is responsible for developing an integrated public health information system to support health policy decisions, state health planning activities, performance analysis, and direction setting for department programs; health policy, health planning and development; health research and analysis; vital records; disease surveillance and outbreak investigation; and planning, directing, coordinating, administering, and supervising a comprehensive Epidemiology and Health Risk Assessment program, which involves federal, state, county, and municipal functions.

This division contains the following 7 activities:

• Policy and Planning - Responsible for directing the DC health improvement process, including engaging multi-sector partners and residents to develop a city-wide shared community agenda for population health improvement. The process develops and monitors the District's Community Health Needs Assessment, a comprehensive population health status report, and Community Health Improvement Plan (Healthy DC), a framework that sets shared goals, develops and monitors health outcome objectives and targets for the year 2030, and prioritizes collective actions aimed at systems-and policy-level change. The team also provides strategic insights and technical assistance related to performance metric alignment with Healthy DC, agency-wide planning activities, alignment with national and city-wide planning processes, data for decision-making, and application of evidence-based interventions/promising practices;

- Data Management and Analysis The Data Management and Analysis Department (DMAD) collects, analyzes, and maintains statistical data to support human services delivery within the Department of Health. In addition, DMAD involves managing large datasets and analyzing trends, patterns, and insights related to health service delivery to inform policy decisions and ensure the accuracy and availability of health-related statistics for program management and improvement. DMAD is also responsible for managing databases, ensuring data security, providing access to authorized users, and updating datasets regularly to keep them indicative of ongoing program operations;
- Informatics provides agency-wide support across a number of areas. Informatics spearheads data modernization and provides leadership and support for the Agency's data governance initiative. Support for workflow automations, interoperability, data-based projects and grants, and direct system support are all functions of informatics. Informatics is also tasked with coordinating work with the designated Health Information Exchange serving the District (CRISP DC HIE), including tracking, developing, and vetting of use cases, and monitoring user access. Informatics may be called on to act as a liaison to IT for any program within DC Health. In addition, Informatics provides leadership on data governance, and supports informatics' initiatives agency wide, including automation of workflows, systems specific support, project management, interoperability support;
- Finance and Grants Policy, Planning, and Evaluation The Office of Finance, Grants, and Administration (OFGA) within the Center for Policy, Planning, and Evaluation (CPPE) is responsible for managing CPPE's financial operations, including budget planning and execution; overseeing grants administration to ensure compliance with federal and local regulations; and coordinating administrative processes to support programmatic goals. The goal of the OFGA is to streamline resource allocation and operational workflows, enabling CPPE to focus on its core mission of advancing health equity, data-driven policy development, and public health planning. By providing strategic oversight and operational support, OFGA ensures the effective and sustainable implementation of CPPE's programs and initiatives;
- **Epidemiologic Studies and Outbreak Investigation** Located within the Center for Policy, Planning and Evaluation (CPPE), this program plans and coordinates epidemiologic studies and outbreak investigations, defines the health status of residents, and assists with tracking of health events. This includes planning, development and coordination of appropriate methodologies to collect and process data as well as monitoring and evaluation of health and social issues. The division responds to internal and external inquiries about various health events and provides reports on health risk behaviors to both internal and external entities;
- **Birth and Death Record Collection, Processing, Analyzing and Dissemination** The District of Columbia Vital Records Division (DCVRD) is the Division of the Department that is responsible for the vital statistics system. "System of vital statistics" means the collection, registration, preservation, amendment, certification, verification, and maintenance of the security and integrity of vital records such as birth and death, vital event data, the collection of other required reports, and related activities. The division is also charged with administering Domestic Partnership Registration and Termination; and
- Development of the State Health Plan and Annual Implementation the District's State Health Plan was designed to serve as a roadmap for developing a comprehensive, accessible, equitable health care system capable of providing the highest quality services cost-effectively and guides the District's Certificate of Need (CON) program by providing objective, refined, and data-driven information. The State Health Planning and Development Agency (SHPDA) is responsible for reviewing CON applications of health care providers requesting to establish new services, make certain capital expenditures, or take other actions subject to CON review as specified in the law. SHPDA is also responsible for monitoring Uncompensated Care requirements of hospitals and other CON-holders.

**Agency Management** – provides administrative support and the required tools to achieve operational and programmatic results. This division is standard for all agencies using performance-based budgeting.

**Agency Financial Operations** – provides comprehensive and efficient financial management services to, and on behalf, of District agencies so that the financial integrity of the District of Columbia is maintained. This division is standard for all agencies using performance-based budgeting.

## **Division Structure Change**

The proposed division structure changes are provided in the Agency Realignment appendix (Schedule 30-PBB) to the approved budget, which is located at www.cfo.dc.gov on the Annual Operating Budget and Capital Plan page.

## FY 2025 Approved Budget to FY 2026 Proposed Budget, by Revenue Type

Table HC0-5 itemizes the changes by revenue type between the FY 2025 approved budget and the FY 2026 proposed budget. For a more comprehensive explanation of changes, please see the FY 2026 Proposed Budget Changes section, which follows the table.

## Table HC0-5

(dollars in thousands)

DIVISION/PROGRAM	BUDGET	FTE
		177.9
Multiple Programs		0.0
		177.9
		50.4
· •		0.0
Environmental Health Services	5,206	0.0
Multiple Programs	383	0.0
Environmental Health Services	1,180	10.0
Multiple Programs	-82	0.0
Agency Management Program	-222	0.0
	95,119	238.2
	24,405	149.0
Multiple Programs	-389	-6.4
1 0	-771	0.0
Multiple Programs	-106	0.0
	23,139	142.7
	5,000	0.0
	0	0.0
	5,000	0.0
	187,545	
		500.0
Multiple Programs	4,886	
Multiple Programs  Multiple Programs	4,886 -1,572	0.0
Multiple Programs		-38.6
	-1,572	500.0 0.0 -38.6 0.0
	Multiple Programs  Multiple Programs  Multiple Programs  Environmental Health Services  Multiple Programs  Environmental Health Services  Multiple Programs  Agency Management Program  Multiple Programs  Multiple Programs  Multiple Programs	92,329

### Table HC0-5

(dollars in thousands)

DESCRIPTION	DIVISION/PROGRAM	BUDGET	FTE
PRIVATE GRANT FUNDS: FY 2025 Approved Budget and FTE		750	0.0
Increase: To align the budget with projected grant awards	Multiple Programs	320	0.0
PRIVATE GRANT FUNDS: FY 2026 Mayor's Proposed Budget		1,070	0.0

#### GROSS FOR HC0 - DEPARTMENT OF HEALTH

314,929 842.4

(Change is calculated by whole numbers and numbers may not add up due to rounding)

Note: For more detailed information regarding the proposed funding for interagency projects funded within this agency, please see Appendix H, FY 2026 Interagency Budgets, of the Executive Summary, Volume 1 located on the OCFO's website.

## **FY 2026 Proposed Operating Budget Changes**

Table HC0-6 contains the proposed FY 2026 budget by fund compared to the FY 2025 approved budget.

### Table HC0-6

			% Change
	FY 2025	FY 2026	from
Appropriated Fund	Approved	Proposed	FY 2025
Local Funds	\$92,329,386	\$95,118,677	3.0
Special Purpose Revenue Funds	\$24,404,833	\$23,138,519	-5.2
Federal Payments	\$5,000,000	\$5,000,000	0.0
Federal Grant Funds	\$187,544,884	\$190,602,064	1.6
Private Grant Funds	\$749,759	\$1,070,002	42.7
GROSS FUNDS	\$310,028,863	\$314,929,262	1.6

#### Mayor's Proposed Budget

**Increase:** The Department of Health's (DOH) proposed Local funds budget reflects an increase of \$6,218,967 and 50.4 Full-Time Equivalents (FTEs) across multiple divisions to align salary and Fringe Benefits with projected costs, primarily in the Community Health Services division to support the agency's direct operation of the School Health Services Program.

In Federal Grant funds, the proposed budget includes an increase of \$4,885,592 across multiple divisions, primarily in contractual services costs, to align the budget with projected grant awards.

The proposed budget for Private Grant funds includes an increase of \$320,243 across multiple divisions, primarily in contractual services costs supporting online shopping for the Nutritional WIC program.

**Decrease:** DOH's proposed Local funds budget includes a decrease in nonpersonnel services of \$7,069,014 across multiple divisions, primarily in subsidies and grants. This adjustment partially offsets the increase in personnel services primarily in the Community Health Services division to support the agency's direct operation of the School Health Services Program.

In Special Purpose Revenue (SPR) funds, the proposed budget includes a decrease of \$389,074 and 6.4 FTEs across multiple divisions to align salary and Fringe Benefits with projected costs. Additionally, in SPR funds, a proposed net decrease of \$770,751 in nonpersonnel services across multiple divisions, reflects savings primarily in occupancy and contractual costs.

In Federal Grant funds, the budget proposal reflects a decrease of \$1,571,688 and 38.6 FTEs across multiple divisions, primarily in the Office of Health Care Facilities and the State Health Statistics divisions to align with projected grant awards and with projected personnel services costs.

**Enhance:** DOH's budget proposal reflects a Local funds increase of \$5,205,759 in nonpersonnel services for the Environmental Health Services division to support Animal Care and Control Services. This increase is comprised of \$3,915,759 in contractual services and \$1,290,000 in occupancy costs. Additionally, the Local budget proposal includes a one-time increase of \$382,650 in nonpersonnel services across multiple divisions to support the agency's operations. This adjustment is comprised of \$326,330 for IT hardware acquisitions, \$38,747 for office support, and \$17,573 for local and out-of-city travel costs.

**Transfer-In:** DOH's proposed Local budget includes an increase of \$1,179,917 in the Environmental Health Services division to reflect a transfer of 10.0 FTEs from the Department of Energy and Environment (DOEE), of which 8.2 FTEs funded with Local funds and 1.8 FTEs will be funded with Federal Grant funds.

**Reduce:** The budget submission reflects proposed one-time reductions of \$82,059 in Local funds; \$106,489 in SPR funds; and \$256,723 in Federal Grant funds to step increases and associated fringe benefit costs across multiple divisions. Additionally, the proposed Local funds budget includes a reduction of \$222,169 in the Agency Management division to align the telecommunications budget with fixed costs estimates.

## FY 2026 Proposed Full-Time Equivalents (FTEs)

Table HC0-7 contains the summary of FY 2026 Proposed Budgeted Full-Time Equivalents (FTEs).

Table HC0-7	
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Total FY 2026 Proposed Budgeted FTEs	842.4
Less: Interagency FTEs budgeted in this agency but employed by other agencies:	
AT0-Office of the Chief Financial Officer	(2.0)
FR0-Department of Forensic Sciences	(29.0)
FX0-Office of the Chief Medical Examiner	(3.0)
GD0-Office of the State Superintendent of Education	(6.0)
PO0-Office of Contracting and Procurement	(2.0)
TO0-Office of the Chief Technology Officer	(1.9)
Total Interagency FTEs budgeted in this agency, employed by other agencies	(43.9)
Add: Interagency FTEs budgeted in other agencies but employed by this agency:	
BY0-Department of Aging and Community Living	0.6
HT0-Department of Health Care Finance	3.6
Total Interagency FTEs budgeted in other agencies, employed by this agency	4.2
Total FTEs employed by this agency	802.6

**Note:** Table HC0-7 displays the impact of the buyer agencies budgets funding the seller agencies FTEs in the FY 2026 budget, compared to how FTEs were budgeted in FY 2025.

- -It starts with the FY 2026 budgeted FTE figure, 842.4 FTEs.
- -It subtracts 43.9 FTEs budgeted in HC0 in FY 2026 who are employed by another agency.
- -It adds 4.2 FTEs budgeted in other agencies in FY 2026 who are employed by HC0.
- -It ends with 802.6 FTEs, the number of FTEs employed by HC0, which is the FTE figure comparable to the FY 2025 budget.