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# Department of Health

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Table HC0-1

Description	FY 2021 Actual	FY 2022 Actual	FY 2023 Approved	FY 2024 Proposed	% Change from FY 2023
OPERATING BUDGET	\$301,076,987	\$312,315,202	\$283,955,264	\$292,002,208	2.8
FTEs	679.3	585.1	757.4	789.6	4.2
CAPITAL BUDGET	\$0	\$0	\$4,750,000	\$493,483	-89.6
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.

The agency's FY 2024 proposed budget is presented in the following tables:

## FY 2024 Proposed Gross Funds Operating Budget and FTEs, by Revenue Type

Table HC0-2 contains the proposed FY 2024 budget by revenue type compared to the FY 2023 approved budget. It also provides FY 2021 and FY 2022 actual data.

**Table HC0-2**

(dollars in thousands)

Appropriated Fund	Dollars in Thousands						Full-Time Equivalents					
	Actual FY 2021	Actual FY 2022	Approved FY 2023	Proposed FY 2024	Change from FY 2023	% Change*	Actual FY 2021	Actual FY 2022	Approved FY 2023	Proposed FY 2024	Change from FY 2023	% Change
<b>GENERAL FUND</b>												
Local Funds	86,712	89,219	98,469	90,894	-7,575	-7.7	139.8	148.2	188.1	190.4	2.3	1.2
Special Purpose Revenue Funds	16,915	20,135	21,892	22,309	417	1.9	113.8	121.9	144.1	143.4	-0.8	-0.5
<b>TOTAL FOR GENERAL FUND</b>	<b>103,627</b>	<b>109,353</b>	<b>120,361</b>	<b>113,203</b>	<b>-7,158</b>	<b>-5.9</b>	<b>253.6</b>	<b>270.1</b>	<b>332.2</b>	<b>333.7</b>	<b>1.5</b>	<b>0.5</b>
<b>FEDERAL RESOURCES</b>												
Federal Payments	4,577	4,956	5,000	5,000	0	0.0	0.0	0.0	0.0	0.0	0.0	N/A
Federal Grant Funds	182,968	186,955	158,595	173,799	15,205	9.6	420.4	309.9	425.2	455.8	30.6	7.2
<b>TOTAL FOR FEDERAL RESOURCES</b>	<b>187,544</b>	<b>191,911</b>	<b>163,595</b>	<b>178,799</b>	<b>15,205</b>	<b>9.3</b>	<b>420.4</b>	<b>309.9</b>	<b>425.2</b>	<b>455.8</b>	<b>30.6</b>	<b>7.2</b>
<b>PRIVATE FUNDS</b>												
Private Grant Funds	255	241	0	0	0	N/A	1.2	0.5	0.0	0.0	0.0	N/A
<b>TOTAL FOR PRIVATE FUNDS</b>	<b>255</b>	<b>241</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>N/A</b>	<b>1.2</b>	<b>0.5</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>N/A</b>
<b>INTRA-DISTRICT FUNDS</b>												
Intra-District Funds	9,650	10,810	0	0	0	N/A	4.1	4.7	0.0	0.0	0.0	N/A
<b>TOTAL FOR INTRA-DISTRICT FUNDS</b>	<b>9,650</b>	<b>10,810</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>N/A</b>	<b>4.1</b>	<b>4.7</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>N/A</b>
<b>GROSS FUNDS</b>	<b>301,077</b>	<b>312,315</b>	<b>283,955</b>	<b>292,002</b>	<b>8,047</b>	<b>2.8</b>	<b>679.3</b>	<b>585.1</b>	<b>757.4</b>	<b>789.6</b>	<b>32.2</b>	<b>4.2</b>

\*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 2024 Operating Appendices** located on the Office of the Chief Financial Officer's website.

In FY 2024, the Intra-District process will be eliminated, and the duplicated budget in the agencies providing services (seller agencies), known as Intra-District budget, will no longer be required. This process will be replaced by a new interagency process, which will enable seller agencies to directly charge interagency projects funded by the agencies receiving the services (buyer agencies). For more detailed information regarding the approved funding for interagency projects funded within this agency, please see Appendix J, FY 2024 Interagency Budgets, in the Executive Summary budget volume.

## FY 2024 Proposed Operating Budget, by Comptroller Source Group

Table HC0-3 contains the proposed FY 2024 budget at the Comptroller Source Group (object class) level compared to the FY 2023 approved budget. It also provides FY 2021 and FY 2022 actual expenditures.

**Table HC0-3**

(dollars in thousands)

Comptroller Source Group	Actual FY 2021	Actual FY 2022	Approved FY 2023	Proposed FY 2024	Change from FY 2023	Percentage Change*
11 - Regular Pay - Continuing Full Time	44,122	45,997	63,444	65,032	1,587	2.5
12 - Regular Pay - Other	25,145	19,829	10,376	17,567	7,191	69.3
13 - Additional Gross Pay	4,739	3,302	0	0	0	N/A
14 - Fringe Benefits - Current Personnel	14,609	14,531	15,185	18,281	3,096	20.4
15 - Overtime Pay	1,281	502	0	0	0	N/A
<b>SUBTOTAL PERSONAL SERVICES (PS)</b>	<b>89,896</b>	<b>84,161</b>	<b>89,006</b>	<b>100,880</b>	<b>11,874</b>	<b>13.3</b>
20 - Supplies and Materials	7,504	2,958	11,706	2,206	-9,500	-81.2
30 - Energy, Communication and Building Rentals	150	122	131	506	375	286.7
31 - Telecommunications	1,605	2,414	1,889	1,769	-120	-6.3
32 - Rentals - Land and Structures	12,172	9,510	14,169	14,732	563	4.0
34 - Security Services	449	400	493	51	-442	-89.6
35 - Occupancy Fixed Costs	261	166	460	538	78	17.0
40 - Other Services and Charges	2,693	21,279	4,273	4,565	292	6.8
41 - Contractual Services - Other	100,692	100,698	70,096	62,333	-7,763	-11.1
50 - Subsidies and Transfers	85,119	89,796	90,743	103,125	12,382	13.6
70 - Equipment and Equipment Rental	536	600	991	1,297	306	30.9
80 - Debt Service	0	209	0	0	0	N/A
<b>SUBTOTAL NONPERSONAL SERVICES (NPS)</b>	<b>211,181</b>	<b>228,150</b>	<b>194,950</b>	<b>191,122</b>	<b>-3,827</b>	<b>-2.0</b>
<b>GROSS FUNDS</b>	<b>301,077</b>	<b>312,310</b>	<b>283,955</b>	<b>292,002</b>	<b>8,047</b>	<b>2.8</b>

\*Percent change is based on whole dollars.

## FY 2024 Proposed Operating Budget and FTEs, by Division/Program and Activity

Table HC0-4 contains the proposed FY 2024 budget by division/program and activity compared to the FY 2023 approved budget. It also provides FY 2021 and FY 2022 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)

Division/Program and Activity	Dollars in Thousands					Full-Time Equivalents				
	Actual FY 2021	Actual FY 2022	Approved FY 2023	Proposed FY 2024	Change from FY 2023	Actual FY 2021	Actual FY 2022	Approved FY 2023	Proposed FY 2024	Change from FY 2023
<b>(1000) AGENCY MANAGEMENT SUPPORT</b>										
(1010) Personnel	1,333	1,334	1,508	1,742	234	10.5	8.3	12.0	13.0	1.0
(1017) Labor Management	163	156	157	181	24	0.9	0.9	1.0	1.0	0.0
(1020) Contracting and Procurement	637	749	661	786	124	7.2	4.1	5.0	6.0	1.0
(1030) Property Management	15,573	12,684	19,313	19,639	326	6.9	3.4	8.0	5.0	-3.0
(1040) Information Technology	1,896	6,562	3,587	4,166	579	14.2	12.0	17.0	28.0	11.0

**Table HC0-4**

(dollars in thousands)

Division/Program and Activity	Dollars in Thousands					Full-Time Equivalent				
	Actual FY 2021	Actual FY 2022	Approved FY 2023	Proposed FY 2024	Change from FY 2023	Actual FY 2021	Actual FY 2022	Approved FY 2023	Proposed FY 2024	Change from FY 2023
(1055) Risk Management	115	123	122	132	10	2.4	0.8	1.0	1.0	0.0
(1060) Legal	2,109	2,254	2,626	2,716	91	11.9	13.2	15.0	14.0	-1.0
(1080) Communications	667	727	895	957	61	6.0	6.2	7.0	7.0	0.0
(1087) Language Access	0	97	100	100	0	0.0	0.0	0.0	0.0	0.0
(1090) Performance Management	2,914	14,841	1,862	1,701	-162	13.4	8.6	10.0	10.0	0.0
(COV9) Coronavirus Relief Fund	378	0	0	0	0	0.0	0.0	0.0	0.0	0.0
<b>SUBTOTAL (1000) AGENCY MANAGEMENT SUPPORT</b>	<b>25,786</b>	<b>39,525</b>	<b>30,831</b>	<b>32,119</b>	<b>1,288</b>	<b>73.5</b>	<b>57.6</b>	<b>76.0</b>	<b>85.0</b>	<b>9.0</b>
<b>(100F) AGENCY FINANCIAL OPERATIONS</b>										
(110F) Agency Fiscal Officer Operations	930	1,028	1,197	1,273	75	8.0	6.7	8.0	8.0	0.0
(120F) Accounting Operations	973	1,055	1,294	1,330	35	12.6	9.2	11.0	11.0	0.0
(130F) ACFO	332	354	337	358	21	3.6	2.5	3.0	3.0	0.0
(140F) Agency Fiscal Officer	268	281	499	511	11	3.0	1.9	2.0	2.0	0.0
<b>SUBTOTAL (100F) AGENCY FINANCIAL OPERATIONS</b>	<b>2,502</b>	<b>2,718</b>	<b>3,328</b>	<b>3,472</b>	<b>143</b>	<b>27.3</b>	<b>20.3</b>	<b>24.0</b>	<b>24.0</b>	<b>0.0</b>
<b>(2500) HLTH EMERG PREPAREDNESS AND RESP.ADMIN</b>										
(2540) Public Health Emergency Preparedness	3,179	3,194	2,401	1,502	-899	3.8	4.8	5.8	2.8	-3.0
(2550) Public Health Emergency. Ops. and Program Support	422	473	1	462	461	1.8	1.6	0.0	2.7	2.7
(2560) Epidemiology Disease Surveillance. and Investing	435	340	362	340	-23	2.9	2.0	2.4	2.4	0.0
(2570) Emergency Medical Services Regulation	37	213	292	201	-91	1.8	2.2	2.1	0.1	-2.0
(2580) Senior Deputy Director	7,161	7,188	4,680	3,919	-761	26.3	17.3	23.7	26.6	3.0
<b>SUBTOTAL (2500) HEALTH EMERGENCY PREPAREDNESS AND RESP.ADMIN</b>	<b>11,235</b>	<b>11,409</b>	<b>7,737</b>	<b>6,424</b>	<b>-1,313</b>	<b>36.5</b>	<b>27.9</b>	<b>34.0</b>	<b>34.7</b>	<b>0.7</b>
<b>(3000) HIV/AIDS HEPATITIS STD AND TB ADMIN</b>										
(3010) HIV/Aids Support Services	2,577	2,046	1,636	2,047	412	9.0	5.1	10.1	12.5	2.4
(3015) HIV/Aids Policy and Planning	1,321	1,176	3,223	3,430	207	20.7	8.6	9.9	10.5	0.6
(3020) HIV Health and Support Services	42,003	31,044	32,127	39,975	7,848	38.0	67.0	87.8	35.1	-52.7
(3030) HIV/Aids Data and Research	2,291	2,339	2,823	4,166	1,343	12.4	13.7	15.6	15.8	0.2
(3040) Prevention and Intervention Services	17,171	11,336	11,741	10,849	-892	29.9	21.8	28.7	18.2	-10.5
(3060) Drug Assistance Program (ADAP)	6,949	11,216	11,972	9,081	-2,891	15.9	13.4	17.2	12.9	-4.3
(3070) Grants and Contracts Management	1,513	1,500	1,083	1,918	836	14.7	6.4	7.4	13.9	6.5
(3080) STD Control	2,119	2,722	3,362	3,192	-170	21.4	18.4	21.5	19.7	-1.8
(3085) Tuberculosis Control	1,650	1,779	1,636	1,751	115	6.4	6.3	8.2	9.2	1.0
(3090) HIV/AIDS Housing and Supportive Services	12,024	11,711	13,823	13,664	-159	2.6	2.5	4.1	4.0	-0.1
<b>SUBTOTAL (3000) HIV/AIDS HEPATITIS STD AND TB ADMIN</b>	<b>89,618</b>	<b>76,869</b>	<b>83,425</b>	<b>90,074</b>	<b>6,650</b>	<b>171.1</b>	<b>163.3</b>	<b>210.5</b>	<b>151.8</b>	<b>-58.7</b>
<b>(4500) HEALTH REGULATION AND LICENSING ADMIN.</b>										

**Table HC0-4**

(dollars in thousands)

Division/Program and Activity	Dollars in Thousands					Full-Time Equivalents				
	Actual FY 2021	Actual FY 2022	Approved FY 2023	Proposed FY 2024	Change from FY 2023	Actual FY 2021	Actual FY 2022	Approved FY 2023	Proposed FY 2024	Change from FY 2023
(4200) Health Professional License Admin	8,311	9,290	9,542	10,184	642	52.9	56.8	77.0	74.4	-2.6
(4515) Food Drug Radiation And Comm. Hygiene	10,693	11,680	14,056	11,876	-2,180	62.8	56.2	63.6	48.8	-14.8
(4530) Health Care Facilities Regulation	6,753	5,308	7,942	8,045	103	38.4	41.2	59.3	54.9	-4.4
(4540) Medical Marijuana	3	0	0	0	0	0.8	0.0	0.0	0.0	0.0
<b>SUBTOTAL (4500) HEALTH REGULATION AND LICENSING ADMIN.</b>	<b>25,760</b>	<b>26,278</b>	<b>31,540</b>	<b>30,105</b>	<b>-1,435</b>	<b>154.8</b>	<b>154.1</b>	<b>199.9</b>	<b>178.1</b>	<b>-21.8</b>
<b>(5000) PRIMARY CARE AND PREVENTION ADMIN.</b>										
(5100) PCPA Support Services	608	702	0	0	0	0.0	0.0	0.0	0.0	0.0
<b>SUBTOTAL (5000) PRIMARY CARE AND PREVENTION ADMIN.</b>	<b>608</b>	<b>702</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>
<b>(7000) OFFICE OF HEALTH EQUITY</b>										
(7010) Multi Sector Collaboration	449	602	491	568	76	3.4	2.6	3.0	4.0	1.0
(7020) Comm Based Part. Research And Policy Eval.	106	117	225	232	6	2.4	1.6	2.0	2.0	0.0
(7030) Health Equity Practice And Program Implement	99	3	88	102	15	1.2	0.8	1.0	1.0	0.0
<b>SUBTOTAL (7000) OFFICE OF HEALTH EQUITY</b>	<b>654</b>	<b>721</b>	<b>805</b>	<b>902</b>	<b>97</b>	<b>7.0</b>	<b>5.0</b>	<b>6.0</b>	<b>7.0</b>	<b>1.0</b>
<b>(8200) CTR FOR POLICY, PLANNING AND EVALUATION</b>										
(8240) Epi Disease Survey & Investigation	650	1,143	1,909	2,254	345	0.0	0.0	0.1	7.4	7.3
(8250) Research Evaluation and Measurement	2,328	35,992	21,425	24,329	2,904	3.6	2.5	2.0	69.0	67.0
(8260) State Center Health Statistics	55,735	15,921	5,606	5,075	-532	38.5	36.8	41.0	36.1	-4.9
(8270) State Health Planning and Development	870	1,111	1,788	1,583	-205	7.4	8.0	9.8	9.5	-0.3
<b>SUBTOTAL (8200) CTR FOR POLICY, PLANNING AND EVALUATION</b>	<b>59,583</b>	<b>54,167</b>	<b>30,728</b>	<b>33,241</b>	<b>2,512</b>	<b>49.5</b>	<b>47.2</b>	<b>52.9</b>	<b>122.0</b>	<b>69.1</b>
<b>(8500) COMMUNITY HEALTH ADMINISTRATION</b>										
(8502) Cancer And Chronic Disease Prevention	7,664	9,485	9,990	9,710	-280	38.4	24.7	35.7	28.5	-7.2
(8505) Health Care Access Bureau	17,865	28,455	11,364	11,800	436	30.8	21.3	37.8	54.0	16.2
(8506) Family Health Bureau	35,422	35,397	44,251	37,868	-6,383	36.7	24.6	37.0	28.2	-8.8
(8510) Support Services	6,322	1,807	8,904	9,481	578	26.1	19.0	23.5	23.5	0.0
(8511) Perinatal and Infant Health	341	295	93	326	233	0.0	3.9	1.0	2.8	1.8
(8513) Nutrition and Physical Fitness	17,768	24,146	20,958	21,789	831	27.7	16.4	19.0	19.0	0.0
(8514) Children, Adolescent and School Health	0	380	0	0	0	0.0	0.0	0.0	0.0	0.0
<b>SUBTOTAL (8500) COMMUNITY HEALTH ADMINISTRATION</b>	<b>85,382</b>	<b>99,966</b>	<b>95,560</b>	<b>90,976</b>	<b>-4,585</b>	<b>159.6</b>	<b>109.9</b>	<b>154.0</b>	<b>156.0</b>	<b>2.0</b>
<b>(8600) PUBLIC HEALTH LABORATORY</b>										
(8610) Administration and Support Services	0	0	0	467	467	0.0	0.0	0.0	4.0	4.0
(8620) Laboratory Services	0	0	0	4,222	4,222	0.0	0.0	0.0	27.0	27.0

**Table HC0-4**

(dollars in thousands)

Division/Program and Activity	Dollars in Thousands					Full-Time Equivalents				
	Actual FY 2021	Actual FY 2022	Approved FY 2023	Proposed FY 2024	Change from FY 2023	Actual FY 2021	Actual FY 2022	Approved FY 2023	Proposed FY 2024	Change from FY 2023
<b>SUBTOTAL (8600) PUBLIC HEALTH LABORATORY</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>4,689</b>	<b>4,689</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>31.0</b>	<b>31.0</b>
<b>(9960) YR END CLOSE</b>										
No Activity Assigned	-52	-40	0	0	0	0.0	0.0	0.0	0.0	0.0
<b>SUBTOTAL (9960) YR END CLOSE</b>	<b>-52</b>	<b>-40</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>
<b>TOTAL PROPOSED OPERATING BUDGET</b>	<b>301,077</b>	<b>312,315</b>	<b>283,955</b>	<b>292,002</b>	<b>8,047</b>	<b>679.3</b>	<b>585.2</b>	<b>757.4</b>	<b>789.6</b>	<b>32.2</b>

(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** in the **FY 2024 Operating Appendices** located on the Office of the Chief Financial Officer’s website. “No Activity Assigned” indicates budget or actuals that are recorded at the division/program level.

**Division Description**

The Department of Health operates through the following 9 divisions:

**Health Emergency Preparedness and Response Administration (HEPRA)** – provides regulatory oversight of Emergency Medical Services and ensures that DOH and its partners are prepared to respond to citywide medical and public health emergencies, such as those resulting from terrorist attacks, large accidents, or natural events such as weather-related emergencies.

This division contains the following 5 activities:

- **Public Health Emergency Preparedness** – provides the District’s response to the emergency medical needs of its visitors and residents. The responsibilities cover a wide range of activities, including the development and training of emergency response plans, coordination of medical response with federal regional and local partners across the healthcare system, and coordination of volunteers through the Medical Reserve Corps. HEPRA also works with community and community organizations to withstand and bounce back from natural and man-made disasters. Resilient communities leverage community connections, relationships, and resources to ensure optimal health and security for individuals and families in both routine and emergency situations;
- **Public Health Emergency Operations and Program Support** – supports government and private partners with the development of their health and safety plans, emergency operation plans, and training exercises. The program also provides a public health command and control element that coordinates all DOH assets and operations during incidents, special events, and national special security events. Pharmaceutical Procurement and Distribution acquires and distributes over \$58 million of life-saving medications for the DOH programs that will allow as many District residents as possible access to medications. It also provides clinical support, formulary management, and quality assurance monitoring to address the needs of all DOH programs that utilize or distribute pharmaceuticals. The program also maintains the Strategic National Stockpile (SNS) of drugs for the Washington, DC region in the event of a declared national emergency;
- **Epidemiology Disease Surveillance and Investigation** – HEPRA works with community and community organizations to withstand and bounce back from natural and man-made disasters. Resilient communities leverage community connections, relationships, and resources to ensure optimal health and

security for individuals and families in both routine and emergency situations; see also the Center for Policy, Planning, and Evaluation (CPPE), which provides surveillance, investigation, and control of reportable diseases, disease outbreaks, and other public health threats within the District of Columbia (excluding sexually transmitted diseases (STDs), hepatitis, HIV/AIDS, and tuberculosis (TB));

- **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
- **Office of the Senior Deputy Director** – provides overall direction, policy development, and supervision for the four subordinate activities.

**HIV/AIDS, Hepatitis, STD, and TB Administration (HAHSTA)** – 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 10 activities:

- **HIV/AIDS Support Services** – provides overall management, planning, direction and support for the HIV/AIDS, STD, TB and adult hepatitis surveillance, prevention, treatment, care, and control programs. It also provides HIV/AIDS information to individuals and community organizations, coordinates HAHSTA participation in public events, prepares written and other resources for public distribution, and manages special projects;
- **HIV/AIDS Policy and Planning** – provides community capacity to more effectively 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 health behavior 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;
- **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;
- **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;
- **AIDS Drug Assistance Program (ADAP)** – 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;
- **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;
- **Tuberculosis Control** – 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; and
- **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.

**Health Regulation and Licensing Administration (HRLA)** – is comprised of the Office of Health Professional Licensing Boards, the Office of Health Care Facilities, the Office of Food, Drug, Radiation and Community Hygiene, and HRLA Support services.

This division contains the following 3 activities:

- **Office of Health Professional License Administration** – the Office of Health Professional Licensing Boards 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;
- **Office of Food, Drug, Radiation and Community Hygiene Regulation** – provides varied inspection and regulatory services. The Food Safety and Hygiene Inspection Services regulates smoking bans in establishments and 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. The Division of Community Hygiene provides abatement notices, inspection of premises, code enforcement, premises baited, catch basin larvicide, community education and outreach, 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. The Division of Radiation seeks to eliminate radiation overexposure of persons from naturally-occurring and man-made radiation by the inspection of dental x-ray tubes and medical x-rays and the regulation of health physicists, suppliers, and radioactive-material users in the District of Columbia; and
- **Office of Health Care Facilities Regulation** – the Health and Intermediate Care Facility Divisions administer 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, HRLA 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, HRLA takes enforcement actions to compel facilities, providers, and suppliers to come into compliance with District and federal law.



**Office of Health Equity (OHE)** – 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 effort 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:

- **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;
- **Community Based Participatory Research and Policy Evaluation** – applies 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; and
- **Health Equity Practice and Program Implementation** – develops and delivers selected programs and initiatives with demonstrable strategic health-equity ‘nexus’ and operationalization potential, so as 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.

**Center for 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 4 activities:

- **Epidemiology Disease Surveillance and Investigation** – provides surveillance, investigation, and control of reportable diseases, disease outbreaks, and other public health threats within the District of Columbia (excluding sexually transmitted diseases (STDs), hepatitis, HIV/AIDS, and tuberculosis (TB));
- **Research, Evaluation, and Measurement** – 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;
- **State Center for Health Statistics** – collects, processes, analyzes, and disseminates birth and death record information and other vital statistics data and information. It is responsible for the statistical analyses of the data generated from birth, death, and other vital records information. In addition, it develops comprehensive statistical and epidemiologic reports on District residents’ health status; and
- **State Health Planning and Development** – develops the District’s State Health Plan and Annual

Implementation, and reviews and approves Certificate of Need applications that allow health care providers to establish new services, make certain capital expenditures, or take other actions as specified in the law. The activity is also responsible for monitoring free care requirements of hospitals and other health care providers.

**Community Health Administration (CHA)** – promotes healthy behaviors and healthy environments to improve health outcomes and reduce disparities in the leading causes of mortality and morbidity in the District. 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 6 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;
- **Health Care Access Bureau** – supports population-based programs to improve access to quality primary care services for residents. The Bureau works to support and promote medical and dental homes 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 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;
- **Family Health Bureau** – 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 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 services and coordinates with education partners to implement policies and programs that support healthy school environments that support the whole child;
- **Support Services** – provides overall oversight of all of the programs and operations of CHA. Provides strategic direction for the administration and represents the agency within District government and to community stakeholders. Sets priorities for administration activities and leads 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;

- **Perinatal and Infant Health** – provides comprehensive services to improve perinatal outcomes for high-risk pregnant and parenting women, the health and development of their infants into early childhood, and health outcomes for children with special healthcare needs by facilitating access to coordinated primary and specialty health care and other services in partnership with their families and community organizations. The overarching goal is to reduce infant mortality and perinatal health disparities in the District of Columbia primarily through a home visiting approach; and
- **Nutrition and Physical Fitness** – promotes health and reduces obesity among District residents by encouraging behavior 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

**Public Health Laboratory** – provides testing of biological and chemical samples that relate to public health and safety, such as infectious diseases, hazardous chemicals, or biological contamination, up to and including biological or chemical terrorist attacks.

This division contains the following 2 activities:

- **Administrative and Support Services** – provides administrative and ancillary support services for the Public Health Laboratory division; and
- **Laboratory Services** – provides testing for naturally occurring or man-made infectious agents, chemical agents, and environmental specimens responsible for human illness or mortality.

**Agency Management** – provides for 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 Department of Health has no division structure changes in the FY 2024 proposed budget.

**FY 2023 Approved Budget to FY 2024 Proposed Budget, by Revenue Type**

Table HC0-5 itemizes the changes by revenue type between the FY 2023 approved budget and the FY 2024 proposed budget. For a more comprehensive explanation of changes, please see the FY 2024 Proposed Budget Changes section, which follows the table.

**Table HC0-5**

(dollars in thousands)

DESCRIPTION	DIVISION/PROGRAM	BUDGET	FTE
<b>LOCAL FUNDS: FY 2023 Approved Budget and FTE</b>		<b>98,469</b>	<b>188.1</b>
Removal of One-Time Costs	Multiple Programs	-10,088	0.0
<b>LOCAL FUNDS: FY 2024 Recurring Budget</b>		<b>88,381</b>	<b>188.1</b>
Increase: To align personal services and Fringe Benefits with projected costs	Multiple Programs	736	-17.3
Decrease: To align resources with operational spending goals	Multiple Programs	122	0.0
Enhance: To support dental services for seniors (\$550k) and Joyful Food Markets (\$324k) (one-time)	Multiple Programs	874	0.0
Transfer-In: From DFS Public Health Lab	Multiple Programs	4,689	31.0
Reduce: To recognize savings from a reduction in FTE(s)	Multiple Programs	-1,231	-11.4
Reduce: To realize savings in nonpersonal services	Multiple Programs	-2,677	0.0
<b>LOCAL FUNDS: FY 2024 Mayor’s Proposed Budget</b>		<b>90,894</b>	<b>190.4</b>
<b>FEDERAL PAYMENTS: FY 2023 Approved Budget and FTE</b>		<b>5,000</b>	<b>0.0</b>
No Change		0	0.0
<b>FEDERAL PAYMENTS: FY 2024 Mayor’s Proposed Budget</b>		<b>5,000</b>	<b>0.0</b>
<b>FEDERAL GRANT FUNDS: FY 2023 Approved Budget and FTE</b>		<b>158,595</b>	<b>425.2</b>
Increase: To align budget with projected grant awards	Multiple Programs	15,205	30.6
<b>FEDERAL GRANT FUNDS: FY 2024 Mayor’s Proposed Budget</b>		<b>173,799</b>	<b>455.8</b>
<b>SPECIAL PURPOSE REVENUE FUNDS: FY 2023 Approved Budget and FTE</b>		<b>21,892</b>	<b>144.1</b>
Increase: To align budget with projected revenues	Multiple Programs	417	-0.8
<b>SPECIAL PURPOSE REVENUE FUNDS: FY 2024 Mayor’s Proposed Budget</b>		<b>22,309</b>	<b>143.4</b>
<b>GROSS FOR HC0 - DEPARTMENT OF HEALTH</b>		<b>292,002</b>	<b>789.6</b>

(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 J, FY 2024 Interagency Budgets, in the Executive Summary budget volume.

## FY 2024 Proposed Operating Budget Changes

Table HC0-6 contains the proposed FY 2024 budget by fund compared to the FY 2023 approved budget.

**Table HC0-6**

Appropriated Fund	FY 2023 Approved	FY 2024 Proposed	% Change from FY 2023
Local Funds	\$98,469,027	\$90,893,861	-7.7
Federal Payments	\$5,000,000	\$5,000,000	0.0
Federal Grant Funds	\$158,594,599	\$173,799,377	9.6
Special Purpose Revenue Funds	\$21,891,637	\$22,308,969	1.9
<b>GROSS FUNDS</b>	<b>\$283,955,264</b>	<b>\$292,002,208</b>	<b>2.8</b>

### Recurring Budget

The FY 2024 budget for DOH includes a reduction of \$10,088,487 to account for the removal of one-time funding appropriated in FY 2023. This funding was comprised of \$6,324,066 for Community Health Administration programs, \$2,364,421 in the Health Regulation and Licensing Administration division to support funding for the new animal shelter to support best practices for animal care and control, \$700,000 to support HIV/Aids prevention, \$250,000 to support Joseph's House, \$250,000 in the Community Health Administration division to support the Alzheimer's Services Public Awareness campaign, and \$200,000 in the Health Emergency Preparedness and Response Administration Division to maintain an upgraded online registry and repository for the Emergency Medical Services and trauma data from healthcare providers.

### Mayor's Proposed Budget

**Increase:** DOH's Local funds budget proposal includes a net increase of \$736,343 in personal services to support cost of living adjustments (COLA) and Fringe Benefits across multiple divisions. This adjustment also includes a reduction of 17.3 Full-Time Equivalent (FTE) positions.

In Federal Grants funds, the proposed budget includes an increase of \$15,204,778 and 30.6 FTES in personal services across multiple divisions to align the budget with projected grant awards.

In Special Purpose Revenue funds, the proposed budget includes an increase of \$417,332 in personal services to align the budget with projected revenues across multiple divisions. This adjustment also includes a 0.8 FTE reduction.

**Decrease:** The proposed Local funds budget includes a decrease of \$122,183 across multiple divisions to align resources with operational spending goals.

**Enhance:** The proposed Local funds budget for DOH reflects a one-time increase of \$874,066, of which \$550,000 is to support dental services for seniors and \$324,066 is to support the Joyful Food Markets.

**Transfer-In:** DOH's Local funds budget proposal includes an increase of \$4,688,853 and 31.0 FTES across multiple divisions to reflect the transfer of the Public Health Lab from the Department of Forensic Sciences. This aligns with the agency's and the District's priorities to provide testing of biological and chemical samples that relate to public health and safety, such as infectious diseases, hazardous chemicals, or biological contamination, up to and including biological or chemical terrorist attacks.

**Reduce:** DOH's proposed Local funds budget is reduced by \$1,231,197 and 11.4 FTES across multiple divisions. This adjustment reflects anticipated savings in personal services due to projected attrition in staffing levels and vacancy savings. Additionally, the proposed Local budget is reduced by \$2,676,928 in nonpersonal services across multiple divisions to align resources with operational spending goals.

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## FY 2024 Proposed Full-Time Equivalent (FTEs)

Table HC0-7 contains the summary of FY 2024 Proposed Budgeted Full-Time Equivalent (FTEs).

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### Table HC0-7

<b>Total FY 2024 Approved Budgeted FTEs</b>	<b>789.6</b>
<b>Less: Interagency FTEs budgeted in this agency but employed by other agencies:</b>	
FX0-Office of the Chief Medical Examiner	(6.0)
PO0-Office of Contracting and Procurement	(1.0)
<b>Total Interagency FTEs budgeted in this agency, employed by other agencies</b>	<b>(7.0)</b>
<b>Add: Interagency FTEs budgeted in other agencies but employed by this agency:</b>	
BY0-Department of Aging and Community Living	1.0
CE0-District of Columbia Public Library	0.1
HT0-Department of Health Care Finance	3.0
RL0-Child and Family Services Agency	0.3
<b>Total Interagency FTEs budgeted in other agencies, employed by this agency</b>	<b>4.4</b>
<b>Total FTEs employed by this agency</b>	<b>787.0</b>

**Note:** Table HC0-7 displays the impact of the buyer agencies budgets funding the seller agencies FTEs in the FY 2024 budget, compared to how FTEs were budgeted in FY 2023.

-It starts with the FY 2024 budgeted FTE figure, 789.6 FTEs.

-It subtracts 7.0 FTEs budgeted in HC0 in FY 2024 who are employed by another agency.

-It adds 4.4 FTEs budgeted in other agencies in FY 2024 who are employed by HC0.

-It ends with 787.0 FTEs, the number of FTEs employed by HC0, which is the FTE figure comparable to the FY 2023 budget.