

Department of Health

www.doh.dc.gov
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Table HC0-1

Description	FY 2022	FY 2023	FY 2024	FY 2025	% Change
	Actual	Actual	Approved	Proposed	from FY 2024
OPERATING BUDGET	\$312,315,202	\$288,696,544	\$292,128,607	\$304,828,997	4.3
FTEs	585.1	612.4	765.8	810.9	5.9
CAPITAL BUDGET	\$0	\$249,296	\$493,483	\$22,756,239	4,511.3
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 2025 proposed budget is presented in the following tables:

FY 2025 Proposed Gross Funds Operating Budget and FTEs, by Revenue Type

Table HC0-2 contains the proposed FY 2025 budget by revenue type compared to the FY 2024 approved budget. It also provides FY 2022 and FY 2023 actual data.

Table HC0-2

(dollars in thousands)

	Dollars in Thousands						Full-Time Equivalents					
	Actual FY 2022	Actual FY 2023	Approved FY 2024	Proposed FY 2025	Change from FY 2024	% Change*	Actual FY 2022	Actual FY 2023	Approved FY 2024	Proposed FY 2025	Change from FY 2024	% Change
Appropriated Fund												
<u>GENERAL FUND</u>												
Local Funds	89,219	99,679	91,020	87,130	-3,891	-4.3	148.2	179.7	166.6	161.9	-4.8	-2.9
Special Purpose Revenue Funds	20,135	22,932	22,309	24,405	2,096	9.4	121.9	140.2	143.4	149.0	5.7	4.0
TOTAL FOR GENERAL FUND	109,353	122,611	113,329	111,534	-1,795	-1.6	270.1	320.0	310.0	310.9	0.9	0.3
<u>FEDERAL RESOURCES</u>												
Federal Payments	4,956	3,546	5,000	5,000	0	0.0	0.0	0.0	0.0	0.0	0.0	N/A
Federal Grant Fund - FPRS	186,955	162,371	173,799	187,545	13,746	7.9	309.9	292.4	455.8	500.0	44.1	9.7
TOTAL FOR FEDERAL RESOURCES	191,911	165,917	178,799	192,545	13,746	7.7	309.9	292.4	455.8	500.0	44.1	9.7
<u>PRIVATE FUNDS</u>												
Private Grant Fund - FPRS	241	169	0	750	750	N/A	0.5	0.0	0.0	0.0	0.0	N/A
TOTAL FOR PRIVATE FUNDS	241	169	0	750	750	N/A	0.5	0.0	0.0	0.0	0.0	N/A
<u>INTRA-DISTRICT FUNDS</u>												
Intra District	10,810	0	0	0	0	N/A	4.7	0.0	0.0	0.0	0.0	N/A
TOTAL FOR INTRA-DISTRICT FUNDS	10,810	0	0	0	0	N/A	4.7	0.0	0.0	0.0	0.0	N/A
GROSS FUNDS	312,315	288,697	292,129	304,829	12,700	4.3	585.1	612.4	765.8	810.9	45.1	5.9

*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 2025 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 J, FY 2025 Interagency Budgets**, in the Executive Summary, Volume I.

FY 2025 Proposed Operating Budget, by Account Group

Table HC0-3 contains the proposed FY 2025 budget at the Account Group level compared to the FY 2024 approved budget. It also provides FY 2022 and FY 2023 actual expenditures.

Table HC0-3

(dollars in thousands)

Account Group	Actual FY 2022	Actual FY 2023	Approved FY 2024	Proposed FY 2025	Change	
					from FY 2024	Percentage Change*
701100C - Continuing Full Time	45,997	49,785	62,261	63,991	1,730	2.8
701200C - Continuing Full Time - Others	19,829	19,713	17,979	18,648	669	3.7
701300C - Additional Gross Pay	3,302	1,135	0	0	0	N/A
701400C - Fringe Benefits - Current Personnel	14,531	15,496	17,762	18,243	481	2.7
701500C - Overtime Pay	502	316	0	0	0	N/A
SUBTOTAL PERSONNEL SERVICES (PS)	84,161	86,445	98,001	100,882	2,881	2.9
711100C - Supplies and Materials	2,958	4,806	1,577	5,618	4,041	256.2
712100C - Energy, Communications and Building Rentals	12,212	13,989	17,545	15,352	-2,194	-12.5
713100C - Other Services and Charges	21,279	5,732	4,510	7,363	2,853	63.3
713101C - Security Services	400	377	51	53	2	3.8
713200C - Contractual Services - Other	100,698	67,892	65,308	70,840	5,532	8.5
714100C - Government Subsidies and Grants	89,796	107,221	103,849	103,532	-316	-0.3
715100C - Other Expenses	0	98	0	0	0	N/A
717100C - Purchases Equipment and Machinery	600	2,136	1,288	1,189	-98	-7.6
717200C - Rentals Equipment and Other	0	0	0	0	0	N/A
718100C - Debt Service Payments	213	0	0	0	0	N/A
SUBTOTAL NONPERSONNEL SERVICES (NPS)	228,155	202,251	194,127	203,947	9,820	5.1
GROSS FUNDS	312,315	288,697	292,129	304,829	12,700	4.3

*Percent change is based on whole dollars.

FY 2025 Proposed Operating Budget and FTEs, by Division/Program and Activity

Table HC0-4 contains the proposed FY 2025 budget by division/program and activity compared to the FY 2024 approved budget. It also provides FY 2022 and FY 2023 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 2022	Actual FY 2023	Approved FY 2024	Proposed FY 2025	Change from FY 2024	Actual FY 2022	Actual FY 2023	Approved FY 2024	Proposed FY 2025	Change from FY 2024
(AFO000) AGENCY										
FINANCIAL OPERATIONS										
(AFO002) Agency Accounting Services	1,055	1,054	1,330	1,277	-52	9.2	8.1	11.0	11.0	0.0
(AFO003) Agency Budgeting and Financial Management Services	1,028	1,124	1,273	1,315	42	6.7	5.9	8.0	8.0	0.0
(AFO005) Agency /Cluster Financial Executive Administration Services	635	751	869	858	-11	4.3	4.0	5.0	5.0	0.0
(AFO009) Audit Adjustments	-40	0	0	0	0	0.0	0.0	0.0	0.0	0.0

Table HC0-4
(dollars in thousands)

Division/Program and Activity	Dollars in Thousands					Full-Time Equivalents				
	Actual FY 2022	Actual FY 2023	Approved FY 2024	Proposed FY 2025	Change from FY 2024	Actual FY 2022	Actual FY 2023	Approved FY 2024	Proposed FY 2025	Change from FY 2024
(AFO010) Payroll Default	0	0	0	0	0	0.0	0.0	0.0	0.0	0.0
(AFO019) Soar Conversion	0	0	0	0	0	0.0	0.0	0.0	0.0	0.0
SUBTOTAL (AFO000) AGENCY FINANCIAL OPERATIONS	2,678	2,930	3,472	3,450	-22	20.3	18.0	24.0	24.0	0.0
(AMP000) AGENCY MANAGEMENT PROGRAM										
(AMP003) Communications	823	822	1,057	1,442	385	6.2	5.9	7.0	8.0	1.0
(AMP005) Contracting and Procurement	749	871	786	1,261	476	4.1	3.4	6.0	8.0	2.0
(AMP011) Human Resource Services	1,334	1,387	1,742	2,061	318	8.3	8.6	13.0	16.0	3.0
(AMP012) Information Technology Services	6,562	6,405	4,166	8,070	3,904	12.0	14.2	29.0	30.0	1.0
(AMP013) Labor Relations	156	115	181	171	-10	0.9	1.0	1.0	1.0	0.0
(AMP014) Legal Services	2,254	2,294	2,716	2,702	-14	13.2	14.0	14.0	14.0	0.0
(AMP019) Property, Asset, and Logistics Management	12,684	16,404	19,639	16,991	-2,648	3.4	6.3	5.0	4.0	-1.0
(AMP024) Risk Management	123	125	132	132	0	0.8	0.7	1.0	1.0	0.0
(AMP030) Executive Administration	14,841	4,242	1,701	1,708	8	8.6	7.7	10.0	10.0	0.0
SUBTOTAL (AMP000) AGENCY MANAGEMENT PROGRAM	39,525	32,666	32,119	34,539	2,420	57.6	61.8	86.0	92.0	6.0
(HS0004) COMMUNITY HEALTH SERVICES										
(H00401) Cancer and Chronic Disease Prevention	9,485	11,384	9,710	10,702	992	24.7	25.4	28.5	34.5	6.0
(H00403) Community of Health Support Services	2,187	7,367	9,481	9,136	-345	19.0	18.1	23.5	28.0	4.6
(H00405) Family Health	35,397	41,757	39,868	39,723	-145	24.6	30.0	28.2	30.2	1.9
(H00406) Health Care Access	28,455	20,091	9,589	10,278	689	21.3	28.0	54.0	52.4	-1.6
(H00407) Nutrition and Physical Fitness	24,146	22,256	22,474	22,523	49	16.4	13.1	19.0	20.0	1.0
(H00408) Perinatal and Infant Health	295	167	326	335	8	3.9	1.0	2.8	2.8	0.0
(H00409) Pcpa Support Services	702	98	0	0	0	0.0	0.0	0.0	0.0	0.0
SUBTOTAL (HS0004) COMMUNITY HEALTH SERVICES	100,668	103,120	91,450	92,698	1,248	109.9	115.6	156.0	167.8	11.8
(HS0006) FOOD, DRUG, RADIATION AND COMMUNITY HYGIENE PROGRAM										
(H00601) Food, Drug, Radiation, and Community Hygiene	11,680	14,548	14,128	14,033	-95	56.2	60.1	51.8	58.0	6.1
SUBTOTAL (HS0006) FOOD, DRUG, RADIATION AND COMMUNITY HYGIENE PROGRAM	11,680	14,548	14,128	14,033	-95	56.2	60.1	51.8	58.0	6.1

Table HC0-4
(dollars in thousands)

Division/Program and Activity	Dollars in Thousands					Full-Time Equivalents				
	Actual FY 2022	Actual FY 2023	Approved FY 2024	Proposed FY 2025	Change from FY 2024	Actual FY 2022	Actual FY 2023	Approved FY 2024	Proposed FY 2025	Change from FY 2024
(HS0007) HEALTH EQUITY SERVICES										
(H00701) Community Based Partnership, Research and Policy Evaluation	117	43	232	255	23	1.6	1.4	2.0	2.0	0.0
(H00702) Health Equity Practice and Program Implementation	3	125	102	12	-90	0.8	0.7	1.0	0.0	-1.0
(H00703) Multi Sector Collaboration	602	478	568	695	127	2.6	2.3	4.0	4.0	0.0
SUBTOTAL (HS0007) HEALTH EQUITY SERVICES	721	646	902	962	61	5.0	4.4	7.0	6.0	-1.0
(HS0008) HIV/AIDS, HEPATITIS, STD, AND TB PREVENTION										
(H00801) Direct Care Services for Tuberculosis	1,779	2,058	1,751	1,988	236	6.3	6.2	9.2	11.3	2.1
(H00802) Drug Assistance	11,216	12,124	9,081	10,782	1,701	13.4	14.2	12.9	10.5	-2.4
(H00803) Grants and Contracts Management	1,500	1,592	1,918	1,639	-279	6.4	6.0	13.9	11.7	-2.2
(H00804) HIV Health and Support Services	31,042	36,937	39,975	38,222	-1,753	66.6	61.2	35.1	33.7	-1.4
(H00805) HIV/AIDS Data and Research	2,339	2,038	4,166	3,992	-174	13.7	11.7	15.8	13.8	-2.0
(H00806) HIV/AIDS Housing and Supportive Services	11,711	11,863	13,664	13,980	316	2.5	2.8	4.0	7.7	3.7
(H00807) HIV/AIDS Policy and Planning	3,225	4,008	5,478	6,126	649	13.7	16.6	23.0	28.4	5.4
(H00808) Prevention and Intervention Services	11,336	11,238	11,099	11,834	735	22.1	20.1	18.2	20.2	2.0
(H00809) STD Control	2,722	3,486	3,192	3,169	-23	18.4	17.1	19.7	24.1	4.4
SUBTOTAL (HS0008) HIV/AIDS, HEPATITIS, STD, AND TB PREVENTION	76,869	85,344	90,324	91,732	1,408	163.3	155.8	151.8	161.4	9.6
(HS0009) MEDICAL AND PUBLIC HEALTH EMERGENCIES										
(H00902) Public Health Emergency Operations and Program Support	7,661	7,573	4,381	4,800	418	18.9	16.9	29.3	28.4	-0.9
(H00903) Public Health Emergency Preparedness	3,194	2,023	1,502	1,481	-21	4.8	5.1	2.8	3.4	0.6
SUBTOTAL (HS0009) MEDICAL AND PUBLIC HEALTH EMERGENCIES	10,855	9,596	5,884	6,281	398	23.7	22.1	32.2	31.9	-0.3
(HS0011) OFFICE OF HEALTH CARE FACILITIES										
(H01101) Health Care Facilities Regulation	5,308	6,217	8,215	7,373	-843	41.2	49.8	54.9	49.8	-5.1
SUBTOTAL (HS0011) OFFICE OF HEALTH CARE FACILITIES	5,308	6,217	8,215	7,373	-843	41.2	49.8	54.9	49.8	-5.1

Table HC0-4
(dollars in thousands)

Division/Program and Activity	Dollars in Thousands					Full-Time Equivalents				
	Actual FY 2022	Actual FY 2023	Approved FY 2024	Proposed FY 2025	Change from FY 2024	Actual FY 2022	Actual FY 2023	Approved FY 2024	Proposed FY 2025	Change from FY 2024
(HS0012) PROFESSIONAL LICENSING										
(H01201) Health Licensing	9,290	13,808	11,853	12,599	746	56.8	74.6	77.6	82.4	4.8
SUBTOTAL (HS0012) PROFESSIONAL LICENSING	9,290	13,808	11,853	12,599	746	56.8	74.6	77.6	82.4	4.8
(HS0013) REGULATORY OVERSIGHT OF EMERGENCY MEDICAL SERVICES										
(H01301) Emergency Medical Services Regulation	213	106	201	135	-66	2.2	2.0	0.1	0.1	0.0
SUBTOTAL (HS0013) REGULATORY OVERSIGHT OF EMERGENCY MEDICAL SERVICES	213	106	201	135	-66	2.2	2.0	0.1	0.1	0.0
(HS0014) RESEARCH EVALUATION AND MEASUREMENT										
(H01401) Epidemiologic Studies and Outbreak Investigation	1,548	6,971	7,738	3,314	-4,423	2.0	1.7	9.8	12.4	2.6
SUBTOTAL (HS0014) RESEARCH EVALUATION AND MEASUREMENT	1,548	6,971	7,738	3,314	-4,423	2.0	1.7	9.8	12.4	2.6
(HS0015) STATE HEALTH PLANNING AND DEVELOPMENT										
(H01501) Development of the State Health Plan and Annual Implementation	1,111	1,458	1,583	1,796	213	8.0	9.5	9.5	9.5	0.0
SUBTOTAL (HS0015) STATE HEALTH PLANNING AND DEVELOPMENT	1,111	1,458	1,583	1,796	213	8.0	9.5	9.5	9.5	0.0
(HS0016) STATE HEALTH STATISTICS										
(H01601) Birth and Death Record Collection, Processing, Analyzing and Dissemination	51,849	11,278	24,260	35,916	11,656	39.3	37.0	105.1	115.7	10.6
SUBTOTAL (HS0016) STATE HEALTH STATISTICS	51,849	11,278	24,260	35,916	11,656	39.3	37.0	105.1	115.7	10.6
(PRG000) NO PROGRAM										
(PRG001) No Program	0	7	0	0	0	0.0	0.0	0.0	0.0	0.0
SUBTOTAL (PRG000) NO PROGRAM	0	7	0	0	0	0.0	0.0	0.0	0.0	0.0
TOTAL PROPOSED OPERATING BUDGET	312,315	288,697	292,129	304,829	12,700	585.2	612.4	765.8	810.9	45.1

(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 2025 Proposed Operating Budget and FTEs, by Division/Office**. Additional information on this agency's interagency agreements can be found in **Appendix H**. All schedules can be found in the FY 2025 Operating Appendices, Volume 6 located on the Office of the Chief Financial Officer's website.

Division Description

The Department of Health operates through the following 13 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 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;
- **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. 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;

- **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 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;
- **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 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;
- **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; and
- **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.

Food, Drug, Radiation and Community Hygiene Program – Located within Health Regulation Licensing and Administration (HRLA), this program 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

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 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:

- **Community Based Participatory 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 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;
- **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.

Medical and Public Health Emergencies – 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 2 activities:

- **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; and

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.

Office of Health Care Facilities – Located within Health Regulation Licensing and Administration (HRLA), 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.

Professional Licensing – Located within the Health Regulation Licensing and Administration (HRLA), 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.

Regulatory Oversight of Emergency Medical Services – Located within the Health Emergency Preparedness and Response Administration (HEPRA), this program 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.

Research Evaluation and Measurement – 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.

State Health Planning and Development – Located within the Center for Policy, Planning and Evaluation (CPPE), this program 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.

State Health Statistics – Located within the Center for Policy, Planning and Evaluation (CPPE), this program 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.

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 Department of Health has no division structure changes in the FY 2025 proposed budget.

FY 2024 Approved Budget to FY 2025 Proposed Budget, by Revenue Type

Table HC0-5 itemizes the changes by revenue type between the FY 2024 approved budget and the FY 2025 proposed budget. For a more comprehensive explanation of changes, please see the FY 2025 Proposed Budget Changes section, which follows the table.

Table HC0-5
(dollars in thousands)

DESCRIPTION	DIVISION/PROGRAM	BUDGET	FTE
LOCAL FUNDS: FY 2024 Approved Budget and FTE		91,020	166.6
Removal of One-Time Funding	Multiple Programs	-1,979	0.0
LOCAL FUNDS: FY 2025 Recurring Budget		89,041	166.6
Increase: To support operational requirements	Multiple Programs	2,155	0.0
Increase: To adjust the Contractual Services budget	Multiple Programs	112	0.0
Decrease: To align personnel services and Fringe Benefits with projected costs	Multiple Programs	-87	2.2
Decrease: To align Fixed Costs with proposed estimates	Agency Management Program	-895	0.0
Enhance: To support a pilot program for emergency childcare needs (one-time)	Community Health Services	300	0.0
Reduce: To reflect cost saving measures in nonpersonnel services	Multiple Programs	-165	0.0
Reduce: To recognize savings from a reduction in FTE(s)	Multiple Programs	-533	-7.0
Reduce: To align Fixed Costs with proposed estimates	Agency Management Program	-1,299	0.0
Reduce: To reflect savings associated with School-based Health Centers	Community Health Services	-1,500	0.0
LOCAL FUNDS: FY 2025 Mayor’s Proposed Budget		87,130	161.9
SPECIAL PURPOSE REVENUE FUNDS: FY 2024 Approved Budget and FTE		22,309	143.4
Increase: To align the budget with projected revenues	Multiple Programs	1,251	0.0
Increase: To align personnel services and Fringe Benefits with projected costs	Multiple Programs	845	5.7
SPECIAL PURPOSE REVENUE FUNDS: FY 2025 Mayor’s Proposed Budget		24,405	149.0
FEDERAL PAYMENTS: FY 2024 Approved Budget and FTE		5,000	0.0
No Change		0	0.0
FEDERAL PAYMENTS: FY 2025 Mayor’s Proposed Budget		5,000	0.0
FEDERAL GRANT FUND - FPRS: FY 2024 Approved Budget and FTE		173,799	455.8
Increase: To align the budget with projected grant awards	Multiple Programs	11,090	0.0
Increase: To align personnel services and Fringe Benefits with projected costs	Multiple Programs	2,655	44.1
FEDERAL GRANT FUND - FPRS: FY 2025 Mayor’s Proposed Budget		187,545	500.0

Table HC0-5

(dollars in thousands)

DESCRIPTION	DIVISION/PROGRAM	BUDGET	FTE
PRIVATE GRANT FUND -FPRS: FY 2024 Approved Budget and FTE		0	0.0
Increase: To align the budget with projected grant awards	Multiple Programs	750	0.0
PRIVATE GRANT FUND -FPRS: FY 2025 Mayor's Proposed Budget		750	0.0
GROSS FOR HC0 - DEPARTMENT OF HEALTH		304,829	810.9

(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 2025 Interagency Budgets, in the Executive Summary budget volume.

FY 2025 Proposed Operating Budget Changes

Table HC0-6 contains the proposed FY 2025 budget by fund compared to the FY 2024 approved budget.

Table HC0-6

Appropriated Fund	FY 2024 Approved	FY 2025 Proposed	% Change from FY 2024
Local Funds	\$91,020,261	\$87,129,521	-4.3
Special Purpose Revenue Funds	\$22,308,969	\$24,404,833	9.4
Federal Payments	\$5,000,000	\$5,000,000	0.0
Federal Grant Fund - FPRS	\$173,799,377	\$187,544,884	7.9
Private Grant Fund -FPRS	\$0	\$749,759	N/A
GROSS FUNDS	\$292,128,607	\$304,828,997	4.3

Mayor's Proposed Budget

Increase: DOH's Local funds budget proposal includes a net increase of \$2,154,740 in subsidies across multiple divisions to support the School Health Services, and Healthy Corners initiatives. In addition, a proposed Local increase of \$111,889 in contracts across multiple divisions is included to allow greater flexibility in the preparation of emergency response services.

In Special Purpose Revenue (SPR) funds, the proposed budget reflects an increase of \$1,250,533 across multiple divisions to support the agency's operations. Additionally in SPR funds, a proposed increase of \$845,331 and 5.7 Full Time Equivalent (FTEs) in personnel services across multiple divisions will align projected salary, step increase, and Fringe Benefit costs.

In Federal Grants funds, the proposed budget includes an increase of \$11,090,327 across multiple divisions primarily in Contractual Services to align the budget with projected grant awards. In addition, a proposed increase of \$2,655,180 and 44.1 FTEs in personnel services across multiple divisions will align projected salary, step increases, and Fringe Benefit costs.

The proposed budget for Private Grants funds includes an increase of \$749,759 across multiple divisions primarily in Contractual Services for the Ryan White Technical System Data Linkage grant.

Decrease: DOH's proposed Local funds budget includes a decrease of \$87,126 in multiple divisions to align the personnel services budget with projected costs. This adjustment also includes an increase of 2.2 FTEs. In addition, a decrease of \$894,759 in the Agency Management division in due to fixed costs estimates across multiple commodities.

Enhance: In the proposed budget for Local funds, a one-time increase of \$300,000 in the Community Health Services division will support a pilot program for emergency childcare needs for birthing parents.

Reduce: DOH's budget proposes Local fund savings of \$164,760 across multiple divisions in nonpersonnel services, primarily for Professional Service Fees, Telecommunications, supplies, and training costs. Additionally in Local funds, the proposed elimination of vacant positions is reflected as a decrease of \$532,683 and 7.0 FTEs across multiple divisions.

In the Agency Management division, a proposed Local funds decrease of \$1,298,975 reflects \$443,994 in Telecommunication Zero Usage savings and \$854,981 in leasing cost savings attributed to the building located at 64 New York Avenue. Lastly, a proposed Local funds decrease of \$1,500,000 in the Community Health Services division is to reflect savings associated with School-based Health Centers.

FY 2025 Proposed Full-Time Equivalents (FTEs)

Table HC0-7 contains the summary of FY 2025 Proposed Budgeted Full-Time Equivalents (FTEs).

Table HC0-7

Total FY 2025 Proposed Budgeted FTEs	810.9
Less: Interagency FTEs budgeted in this agency but employed by other agencies:	
AT0-Office of the Chief Financial Officer	(2.0)
BE0-Department of Human Resources	(3.0)
FR0-Department of Forensic Sciences	(29.0)
FX0-Office of the Chief Medical Examiner	(7.0)
PO0-Office of Contracting and Procurement	(2.0)
TO0-Office of the Chief Technology Officer	(1.0)
Total Interagency FTEs budgeted in this agency, employed by other agencies	(44.0)
Add: Interagency FTEs budgeted in other agencies but employed by this agency:	
BY0-Department of Aging and Community Living	1.0
HT0-Department of Health Care Finance	3.2
RL0-Child and Family Services Agency	0.4
Total Interagency FTEs budgeted in other agencies, employed by this agency	4.6
Total FTEs employed by this agency	771.5

Note: Table HC0-7 displays the impact of the buyer agencies budgets funding the seller agencies FTEs in the FY 2025 budget, compared to how FTEs were budgeted in FY 2024.

- It starts with the FY 2025 budgeted FTE figure, 810.9 FTEs.
- It subtracts 44.0 FTEs budgeted in HC0 in FY 2025 who are employed by another agency.
- It adds 4.6 FTEs budgeted in other agencies in FY 2025 who are employed by HC0.
- It ends with 771.5 FTEs, the number of FTEs employed by HC0, which is the FTE figure comparable to the FY 2024 budget.