



April 17, 2023

MEMORANDUM

TO: Krystal Oriadha, Chair
Health, Human Services and Public Safety (HHSPS) Committee

THRU: Josh Hamlin
Director of Budget and Policy Analysis

FROM: Anya Makarova
Senior Budget and Policy Analyst

RE: Health Department
Fiscal Year 2024 Budget Review

Budget Overview

- Overall, FY 2023 estimated expenditures are expected to exceed the FY 2023 Approved Budgeted expenditures:
 - FY 2023 General Fund expenditures are projected to be under the approved budget level.
 - The latest supplemental request for Grant Funds is estimated at \$28.6 million driven by additional grant awards.
- The FY 2024 proposed budget for the Health Department is \$87,886,300, representing a \$10,644,400 decrease, or 10.8%, below the FY 2023 approved budget, or \$18,258,700 below the FY 2023 estimated level of expenditures.
- Decreases in the FY 2024 proposed budget are driven by a \$13.2 million reduction in grant funds, which is partially offset by a \$2.6 million increase in General Fund's compensation, fringe and operating expenditures, resulting in a net \$10.6 million decline in the total proposed budget when comparing to the FY 2023 authorized budget level.
- Representing \$52.6 million out of the total proposed budget of \$87.9 million, 60% of the Health Department's budget is anticipated to be grant funded.

Fund	FY 2021 Actual	FY 2022 Actual	FY 2023 Approved	FY 2023 Estimated	% Change - Est vs App	FY 2024 Proposed	\$ Change, Prop vs App	% Change
General Fund	\$ 36,450,250	\$ 31,076,462	\$ 32,706,000	\$ 27,575,800	-15.7%	\$ 35,307,800	\$ 2,601,800	8.0%
Grants	43,892,314	52,668,644	65,824,700	78,569,200	19.4%	52,578,500	(13,246,200)	-20.1%
Total	\$ 80,342,564	\$ 83,745,106	\$ 98,530,700	\$ 106,145,000	7.7%	\$ 87,886,300	\$ (10,644,400)	-10.8%

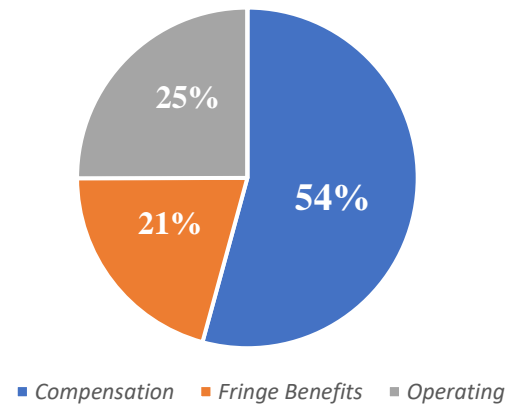
- \$13.4 million in General Fund revenues are being allocated to support the Health Department’s operations in FY 2024, these revenues include: \$2.0 million in health fees, \$2.3 million in health permits charges, and \$9.1 million in State Health Grant. The \$13.4 million in FY 2024 revenue allocation represents a reduction from \$14.9 million budgeted in FY 2023.

Budget Comparison – General Fund

Category	FY 2022 Actual	FY 2023 Approved	FY 2023 Estimated	FY 2024 Proposed	Change Amount	Percentage Change (Approved Budget)	Percentage Change (Estimated Budget)
Compensation	\$ 17,254,854	\$ 19,245,500	\$ 15,639,000	\$ 20,692,000	\$ 1,446,500	7.5%	32.3%
Fringe Benefits	5,655,860	7,300,200	5,944,000	7,904,300	604,100	8.3%	33.0%
Operating Expenses	10,815,477	8,997,100	8,829,600	9,548,300	551,200	6.1%	8.1%
Capital Outlay	1,142	-	-	-	-	n/a	n/a
Subtotal	\$ 33,727,333	\$ 35,542,800	\$ 30,412,600	\$ 38,144,600	\$ 2,601,800	7.3%	25.4%
Recoveries	(2,650,871)	(2,836,800)	(2,836,800)	(2,836,800)	-	0.0%	0.0%
Total	\$ 31,076,462	\$ 32,706,000	\$ 27,575,800	\$ 35,307,800	\$ 2,601,800	8.0%	28.0%

- The proposed FY 2024 General Fund budget is proposed at \$35.3 million, representing an 8.0% increase above the FY 2023 Approved Budget (\$32.7 million), or a 28.0% increase above the FY 2023 estimated level of expenditures (\$27.6 million).
- Not accounting for the recoveries, the Department’s General Fund proposed budget is comprised of 54% of funds allocated for compensation, 21% allocated for fringe expenditures and the remaining 25% is allocated for operational expenses.

FY 2024 Proposed General Fund Expenditures by Category



Compensation

- In FY 2024, General Fund compensation expenditures are budgeted to increase by \$1,446,500, or 7.5%, above the FY 2023 Approved Budget (or \$5.1 million, 32.3%, above the FY 2023 estimated level of expenditures). The increases are driven by funding for three (3) new Community Developer 2G positions, overtime and salary adjustments.
- In FY 2024 the authorized General Fund staff complement is proposed to increase by three (3) full-time positions, resulting in 232 authorized full-time staffing complement. In FY 2024 part-time positions will remain at FY 2023 authorized level of one (1) position.

General Fund Authorized Staffing Count

	FY 2021 Approved	FY 2022 Approved	FY 2023 Approved	FY 2024 Proposed	Change Amount	Percentage Change
Full-Time Civilian	217	227	229	232	5	2.3%
Part-Time	1	1	1	1	0	0.0%
Total	218	228	230	233	5	2.3%

Fringe Benefits

Fringe Benefits Historical Trend						
	FY 2020 Actual	FY 2021 Actual	FY 2022 Actual	FY 2023 Budget	FY 2023 Estimated	FY 2024 Proposed
Compensation	\$ 16,946,024	\$ 16,568,317	\$ 17,254,854	\$ 19,245,500	\$ 15,639,000	\$ 20,692,000
Fringe Benefits Expenditures	\$ 5,575,182	\$ 5,778,419	\$ 5,655,860	\$ 7,300,200	\$ 5,944,000	\$ 7,904,300
As a % of Compensation	24.8%	25.9%	24.7%	27.5%	27.5%	27.6%

- In FY 2024 fringe benefits expenditures are proposed to increase by \$604,100, or 8.3%, above the FY 2023 approved budget level (or \$2.0 million, 33.0% above the FY 2023 estimated level of expenditures).

Operating Expenses

- FY 2024 General Fund operating expenditures are proposed to increase by \$551,200, or 6.1%, above the FY 2023 approved budget level, or \$0.7 million, 8.1% increase from the FY 2023 estimated level of expenditures. Increases are driven by office automation charges, training and travel non-training cost increases.
- A list of proposed operating expenses is provided in response to the *FY 2024 First Round Budget Review Question No. 23*.
 - The largest increase (\$319,200, or 6.5%) is proposed for the *Office Automation* category to reflect the cost of Office of Information Technology charges. Other significant increases include in *Office/Building Rental/Lease* category (\$136,000, or 32.4%) to support Langley Park Center lease and janitorial services and *Building Repair/Maintenance* category (\$100,000, or 312.5%).
 - *General & Administrative Contracts* category has the greatest proposed dollar spending reductions as it is anticipated to decrease by 5.7% or \$63,800.

Recoveries

- The FY 2023 recoveries are proposed at \$2,836,800, which represents no change from the FY 2023 approved budget level. Recoveries are proposed to increase to recover various operating expenditures from grant funds.
- A list of recoveries is provided in response to the *FY 2024 First Round Budget Review Question No. 26* and includes recoveries from the Solid Waste Enterprise Fund, Drug Enforcement Special Revenue Fund, recoveries from grants and from the Department of Family Services.

Grants

Category	FY 2021 Actual	FY 2022 Actual	FY 2023 Approved	FY 2023 Estimated	FY 2024 Proposed	Change Amount	Percentage Change
Compensation	\$14,601,889	\$14,246,084	\$22,052,600	\$15,670,100	\$20,644,900	-\$1,407,700	-6.4%
Fringe Benefits	\$4,043,488	\$3,935,668	\$5,862,200	\$5,359,000	\$7,886,400	\$2,024,200	34.5%
Operating Expenses	\$25,262,174	\$34,794,983	\$38,332,200	\$57,914,800	\$24,469,500	-\$13,862,700	-36.2%
Capital Outlay	\$20,690	\$0	\$0	\$0	\$0	\$0	N/A
Total	\$43,928,241	\$52,976,735	\$66,247,000	\$78,943,900	\$53,000,800	-\$13,246,200	-20.0%

- Information on the distribution of grant funds between different divisions and breakdown by categories of expenditures is included in and response to the *FY 2024 First Round Budget Review Question No. 5* and *Attachment A* provided in response to *Question No. 4*.
- FY 2023 grants:
 - The Department is anticipated to exceed its FY 2023 approved Grant Funds budget due to numerous unanticipated grant awards (which will require a supplemental budget request).
 - No grant funds have been returned in FY 2022.
 - The Department reports that it is able to submit all grant reporting on-time, however the ability to hire grant funded personnel in a timely manner presents a challenge for executing grant funded initiatives, especially for annual grant awards (as opposed to multi-year awards).
- The \$53.0 million in grant funds proposed in FY 2024 represent a \$13.2 million, or 20.1%, decrease from the approved FY 2023 level, or a \$25.9 million (-32.9%) decrease from the FY 2023 estimated level of grant expenditures. The largest decreases (over \$1 million) are driven by the removal of the *Opioid Local Abatement Fund*, *Mental Health Services Grant*, and *Pediatric Health* grants. The most significant (over \$1 million) funding reductions are anticipated for the *Community Health Integration Service System Program* and *AIDS Case Management* grant award.
- \$52.6 million Grant Funds budget proposed for FY 2024 represents 60.0% of the Department’s overall budget. The proposed budget includes \$422,300 in County contribution/cash match funds, for a total Grant Funds budget of \$53.0 million.
- Out of 74 grant funded programs included in the FY 2024 proposed budget, the following five (5) have the largest budgets:
 - \$3,439,600 is included in the FY 2024 Proposed Budget for the *AIDS Case Management* grant (Family Health Services Division).
 - \$2,463,100 is included in the FY 2024 Proposed Budget for the *Implement Ending the Epidemic* grant (Family Health Services Division).
 - \$3,566,600 is included in the FY 2024 Proposed Budget for the *General Medical Assistance Transportation* (Health and Wellness Division).
 - \$3,505,100 is included in the FY 2024 Proposed Budget for the *General Fund Services* (Behavioral Health).
 - \$2,400,000 is included in the FY 2024 Proposed Budget for the *Diabetes, Heart Disease and Stroke* (Health and Wellness Division).
 - *Information about grant funded programs are available on pages 504-510 of the FY 2024 Proposed Budget Book.*

- The FY 2024 budget proposes a Grant Funded staff complement of 251 full-time, three (3) part-time and 94 limited term positions. As can be seen from the accompanying table, the total number of grant funded employees remains the same as in FY 2023, however there are shifts in personnel allocations between the different grant awards and categories as 67 limited term positions are converted into full-time grant funded positions.

Grant Program Funds Authorized Staffing Count

	FY 2021 Approved	FY 2022 Approved	FY 2023 Approved	FY 2024 Proposed	Change Amount	Percentage Change
Full-Time Civilian	183	183	184	251	67	36.6%
Part-Time	8	3	3	3	0	0.0%
Limited Term	123	142	161	94	-67	-54.5%
Total	314	328	348	348	0	0.0%

- The following grant programs provide funding for most of the grant funded positions:
 - *MCHP Eligibility Determination* is authorized 23 full-time grant funded, one part-time, and 3 LTGF positions in FY 2024.
 - *Women, Infants, and Children (WIC)* is authorized 24 full-time grant funded and 1 LTGF positions in FY 2024.
 - *AIDS Case Management* program is authorized 22 full-time grant funded and 1 LTGF positions in FY 2024.
 - *General Fund Services* is authorized 19 full-time grant funded, one part-time, and 1 LTGF positions in FY 2024.
 - *American Rescue Plan Act* program is authorized 4 full-time grant funded and 16 LTGF positions in FY 2024.
 - *Administrative/LAA* is authorized 20 full-time grant funded positions in FY 2024.
 - *Additional details on grant funded staffing allocation are available on pages 500-503 of the FY 2024 Proposed Budget Book.*

COVID-19 Relief Funds

- The American Rescue Plan (ARP) Act spending recommendations (adopted CR-067-2021) for the Health Department included \$19.6 million for FY 2022, \$25.0 million for FY 2023 and \$10.0 million in FY 2024:

	FY 2021	FY 2022	FY 2023	FY 2024	Total
Health					
COVID Vaccine and Tracking Services		\$6.8			\$6.8
Cheverly Building Replacement		\$5.0	\$15.0		\$20.0
Uninsured Services - FQHCs		\$2.8	\$5.0	\$5.0	\$12.8
Behavioral Health - service expansion		<u>\$5.0</u>	<u>\$5.0</u>	<u>\$5.0</u>	<u>\$15.0</u>
<i>Sub-Total</i>		\$0.0	\$19.6	\$25.0	\$54.6

- A more detailed breakdown with updated FY 2022 and FY 2023 spending information is provided in the accompanying table:

Coronavirus Aid, Relief and Economic Securities Act - Coronavirus Relief Fund (CRF)					
	Division	FY 2022 Budget	FY 2022 Estimate	FY 2022 Actual	FY 2023 Estimated
1	Communications	\$ 250,000	\$ 65,000	\$ 434,903	\$ -
2	COVID 19 Vaccination Operations	\$ 4,573,669	\$ 4,474,500	\$ 5,581,028	\$ 8,916,128
3	COVID 19 Testing Operations	\$ 1,015,513	\$ 502,300	\$ 656,605	\$ 1,319,505
4	Hazard Pay/Premium Pay	\$ -	\$ 815,400	\$ 642,183	\$ -
5	Other COVID 19 Expenses	\$ 1,110,818	\$ 764,600	\$ -	\$ -
6	Other Public Health Services	\$ -	\$ -	\$ 1,255,477	\$ 2,139,577
7	Mental Health Behavioural Health	\$ 3,195,764	\$ 1,906,900	\$ 336,356	\$ 3,221,556
8	Substance Abuse Behavioral Health	\$ 454,843	\$ 454,800	\$ 637,564	\$ 1,083,464
9	Administrative/ARP Infrastructure	\$ 1,199,393	\$ 318,900	\$ 691,779	\$ 1,832,479
10	Healthcare Alliance Health Assures	\$ 2,800,000	\$ 2,800,000	\$ 3,167,830	\$ 10,600,030
11	Cheverly Building	\$ 5,000,000	\$ -	\$ 436,660	
TOTAL		\$ 19,600,000	\$ 12,102,400	\$ 13,840,385	\$ 29,112,739

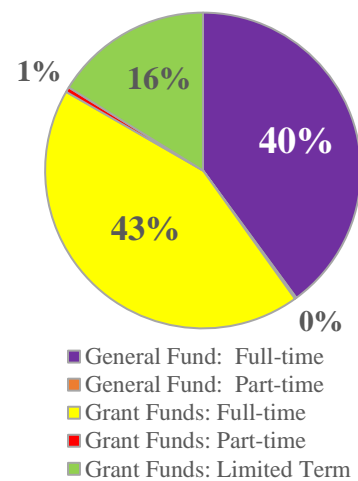
- An overview of the ARP funded activities for each line item is provided in response to the *FY 2024 Second Round Budget Review Question No. 1a*.

Staffing

- In FY 2024, the Department’s staffing is proposed to increase by three (3) General Funded full-time positions above FY 2023 authorized staffing level resulting in:

- 232 General Fund full-time positions (increase of 3 positions)
- One (1) General Funded part-time position (no change)
- 251 Grant Funded full-time positions (increase of 67)
- Three (3) Grant Funded part-time positions (no change), and
- 94 Grant Funded limited term positions (a reduction of 67 positions, which are reallocated to Grant Funded full-time staffing complement)

FY 2024 Proposed Staffing by Funding Source



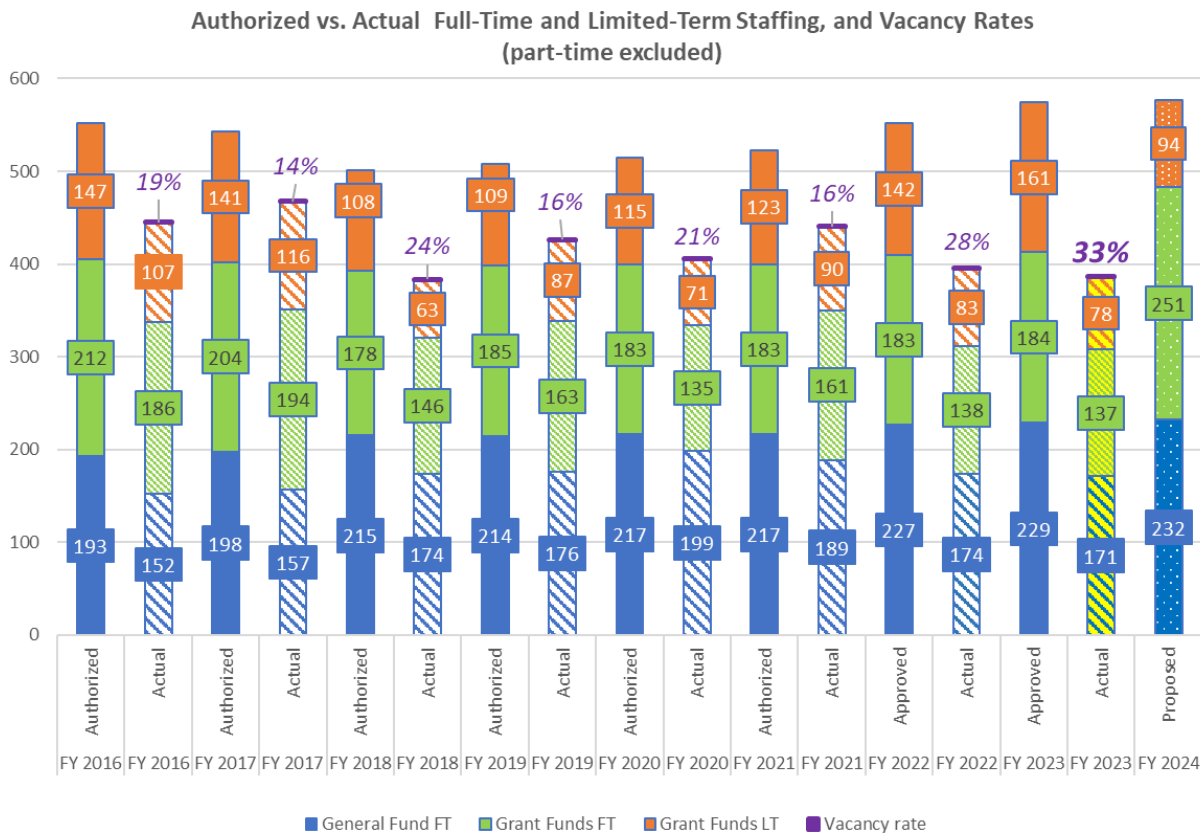
- In FY 2023, the Department’s General Fund full-time authorized staffing level is 229 positions and one (1) part-time position. Grant funds provide funding for 184 full-time grant funded, three (3) part-time grant funded and 161 limited-term positions.

- In FY 2023, as of January 10th, the Department reported having 53 General Fund full-time vacancies, which represents an effective General Funded full-time vacancy rate of 25% (compared to 23% last year and 13% two years ago).

- In FY 2023, as of January 10th, the Department had 47 Grant Funded vacancies. This represents a full-time Grant Funded vacancy rate of 26% (compared to 25% last year and 12% two years ago).
 - In FY 2023, as of January 10th, the Department had 83 limited term Grant Funded vacancies. This represents a limited term Grant Funded vacancy rate of 52% (compared to 42% last year and 27% two years ago).
- Since FY 2021, the number of Health Department’s vacancies has grown exponentially across all three (3) largest staffing segments (General Fund full-time positions, Grant Funds full-time positions, and Grant Funded limited term positions), increasing from 88 vacancies reported for FY 2021 to 188 vacancies being reported for FY 2023 (114% increase).

	<i>FY 2021 Vacancies</i>	<i>FY 2022 Vacancies</i>	<i>FY 2023 Vacancies</i>	<i>Change</i>
General Fund: full-time	28	53	58	5
General Fund: part-time	0	0	0	0
Grant Funds: full-time	22	45	47	2
Grant Funds: part-time	5	0	0	0
Grant Funds: limited term	33	59	83	24
Total	88	157	188	31

- The Department *did not* attain its authorized level for either General Fund or Granted Funded positions and has operated with double digit vacancy rates for years as can be seen from the accompanying graph. In FY 2023 the vacancy rate for the Health Department is at all times high of 33%.



- According to the Department, the Family Health Services and the Behavioral Health Services divisions are most impacted by high vacancy rates. The distribution of the Department's authorized and actual staffing resources across its organizational divisions is presented in response to the *FY 2024 First Round Budget Review Question No. 9*.
- The Department uses overtime to augment short staffing levels in critical areas. The use of overtime and compensatory time is used to fulfill the additional tasks and demands of the Department, including specific projects with fixed deadlines. In FY 2023 the Department has spent \$510,336 as of March 10, 2023, exceeding its authorized overtime budget of \$56,000 by 911%. The response to the *FY 2024 First Round Budget Review Question No. 20* also shows that the approved overtime budget as well as the FY 2024 proposed overtime budget (\$93,000) are not reflective of the Department's actual historical spending trends.
- To meet its workload demands while operating with high vacancy levels and high employee turnover for certain positions, the Department resorts to contracting temporary employees. While use of temporary personnel is a short-term feasible solution to the staffing challenges, temporary employees are not an ideal solution due to the lack of expertise required for some duties and their inability to obtain access to County systems, which also limits their capabilities. In March of 2023, the Department reported having 38 temporary employees.
- Employee retention and attrition:
 - In FY 2023, as of March 16, the Department has lost a total of 43 employees to attrition (21 Grant Funded and 22 General Funded civilians). In FY 2022 the Department lost a total of 64 employees to attrition.
 - Positions most affected by employee attrition are: Community Health Nurse, Nurse practitioner, Licensed Practical Nurse, Counselor, Community Developer, and Disease Intervention Specialist. These positions collectively represent 244 positions, or 42% of all of the Health Department's authorized positions.
 - Overall, it is most challenging to retain limited term Grant Funded employees (42% vacancy rate). One of the strategies planned to address this issue in FY 2024 is the proposed reallocation of 67 Granted Funded limited term positions to the Grant Funded full-time staffing complement. This strategy may yield some positive results, because, generally, Grant Funded merit positions are more attractive to the prospective applicants than Grant Funded limited term positions. However, Grant Funded merit positions also have a high vacancy rate, so the reallocation alone can yield improvements but is not a magic bullet and should be a part of a larger holistic multi-faced efforts to address the Department's retention issues.
 - Key contributors to the employee attrition are lack of promotional opportunities, and lack of competitive salaries and benefits.
 - According to the Department, approximately \$2.0 million in salary lapse was accumulated in FY 2022 (which was used to pay for COVID related operating expenses) and \$1.7 million in salary lapse has been accrued in FY 2023 to date.
- Recruitment overview:
 - Persistent high vacancy rates (vacancy rates fluctuating between 14% and a new record of 33% since FY 2016) are indicative of long-standing recruitment challenges and inability to fill vacancies.

- In November of 2022 the Department outlined several measures to address its recruitment and retention challenges, including:
 - Conduct outreach and establish external partnerships to fill limited term Grant Funded (LTGF) positions
 - Identify social media and talent platforms to promote vacant positions
 - Implement an employee engagement survey which will serve as a benchmark for engaging and retaining employees
 - Offer a sign-on bonus of up to \$2,000 to any Community Health Nurse or Licensed Practical Nurse who is hired and has completed their probationary period
 - Offer an employee referral award of up to \$500 to any employee who refers a qualified Community Health Nurse or Licensed Practical Nurse that is hired

The Department reported in March of this year that all of the above-mentioned strategies have been implemented.

- In addition, the Department has recently participated in the County's job fair, enabling the talent acquisition team to connect with over 200 applicants. The Department is also partnering with the University of Maryland to identify internship and direct hire opportunities.
 - Last year it was reported that the Department largely relies on the Office of Human Resources Management (OHRM) to fill its vacancies and that the Department hopes to staff an internal human resources component. One of the Department's core goals for FY 2023 was to expand its Human Resources Team to include "*a talent acquisition sub team focused on outreach, sourcing talent, establishing additional partnerships with universities and building a talent pipeline*", other Human Resources Team members work on payroll, labor relations and other HR matters. The Team filled all its vacant positions and has increased from two (2) employees to nine (9) employees.
 - The Department reports that a total of 43 positions were filled as of March 1, 2023.
 - The Department noted that there were no funds for recruitment in FY 2023 and the proposed budget includes \$50,000 for sign up bonuses, employee referral bonuses and some advertising.
 - Unlike previous years, there are definitive efforts to address the Department's recruitment challenges. It may be too early to fully judge the effectiveness of the Department's efforts, and the Department may be able to improve its ability to fill vacant positions in the remainder of FY 2023 and in FY 2024. It should be noted that developing a comprehensive understanding for employee separations, creation of agency-specific employee retention strategy, developing agency-specific employee recruitment strategy, improving the competitiveness of the Department's positions, revising the position classification typology and other critical to resolving recruitment issues steps may not be addressed by the Department alone.
- None of the Department's positions are a part of the OHRM's planned comprehensive classification studies for FY 2023. Additional information from the OHRM has been requested to determine if any of the Department's positions may be included in the FY 2024 classification studies (large scale contracted out) or position desk-audit studies (smaller scale in-house studies).
 - The Department plans to continue hybrid teleworking practices as it serves as an important employee retention tool.

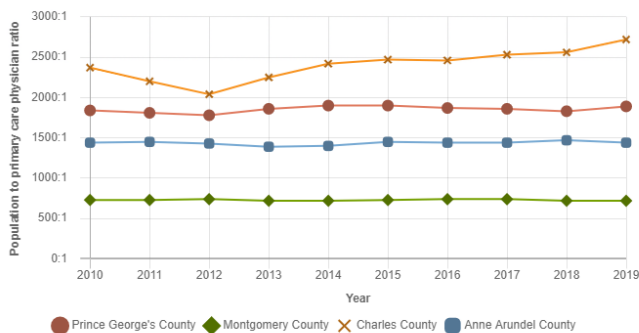
Workload and Program Management

- In FY 2023 the Department made an organizational change: the Local Behavioral Health Authority (LBHA) will now report to the Acting Deputy Health Officer for Public Health, instead of reporting to the Associate Director of the Behavioral Health Services. There is no fiscal impact for this change. The LBHA is a State-mandated entity tasked with planning, managing and monitoring the Public Behavioral Health System for the County, including the Department's own Behavioral Health Services. This organizational change creates segregation of duties necessary for the LBHA to oversee operations of the Behavioral Health Services Division.
- The latest *Prince George's County Community Health Assessment* was prepared by the Department in 2022. A copy of this 226-page document is available at the Health Department's website: <https://www.princegeorgescountymd.gov/ArchiveCenter/ViewFile/Item/3677>. The next assessment is being planned for 2025.
- In FY 2023, when compared to FY 2022, as the COVID-19 virus transitioned from pandemic to endemic, the Department's response has transitioned as well. Emergency response is no longer necessary and COVID vaccinations have become a part of regular Departmental operations.
- The Department's key goals for FY 2023 are:
 - *Continued utilization of the OCHIN Epic Electronic Health Record (HER)*. This system serves the Health Department and its clients. Clinicians receive access to patient medical records data and the clients can use the MyChart portal, which allows patients to access and keep track of their medications, lab results, immunizations, and more, as well as manage appointments, send and receive secure messages, request prescription refills and referrals, and pay bills with a credit card (with third-party integration).
 - *Optimizing utilization of the Local Exchange/Public Health Information Network (PHIN)*. Public Health Information Network is a public health information-sharing platform and Prevention Link is a platform for disease prevention and population health management, which includes a central referral service between healthcare providers, County, and community-based organizations, and a capacity to link prevention programs with providers and service teams. Programs include Diabetes Prevention and Management, Cardiac Rehab Referral, Medication Therapy Management, Renal Disease Screening and Referral, Hypertension Prevention and Management, etc. This system is used by the Health Department and the overall public health system.
 - *Health Department Strong*. This objective focuses on building the foundational infrastructure including staffing, improving administrative business processes, setting cost rates, and developing a plan for resource stability. Some of the accomplishments include fully staffing the Human Resources team, working on converting limited term positions to full-time Grant Funded positions, working with the Office of Finance on cost rate analysis, etc.
 - *Ending HIV Epidemic*. The Department reports that there has been an increase in newly diagnosed infections in 2021 (244), compared to 2020 (221). Based on the Health department's 2022 Prince George's County Community Health Assessment Report, in 2020 new HIV cases in Prince George's County comprised 30% of all new cases in Maryland, and 8,014 of the County residents live with HIV.
 - Please see response to the to the *FY 2024 First Round Budget Review Question No. 31* for a more detailed overview of the Department's efforts to meet these objectives.

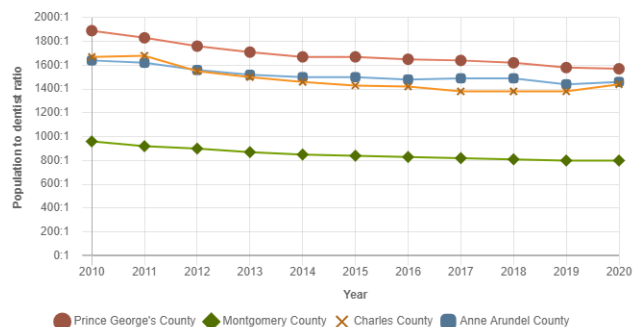
- Department’s key FY 2024 goals and objectives include:
 - *Implementing HD Strong*: reduce vacancy rate by 50%, establish several key support positions; conduct mapping, tracking and streamline administrative business processes; develop a standard indirect cost rate; develop a comprehensive plan to increase resource stability.
 - *Ending the HIV Epidemic*: the goal is to reduce new infections by 75% in 5 years and by 90% over the next decade. Five components of the strategy to meet these objectives include diagnostics, treatment, protection (prevention), response (prevention in geographic clusters with high transmission levels), and HIV Health Force (increase the number of HIV service providers).
 - *Strengthening the Behavioral Health Continuum*: maintain and expand capacity to provide behavioral health services to the County residents, including prevention, intervention, treatment, and recovery services. The integrated behavioral health system of care ought to include behavioral health care providers, somatic care providers, and other agencies. Expansion of the behavioral health continuum of care to include establishing a behavioral health crisis stabilization center in the County.
 - *Preparing for Accreditation*: the goal is to apply for accreditation from the Public Health Accreditation Board.

- With regards to healthcare services availability, according to the *County Health Rankings and Roadmaps* data, which was released in 2022, in 2019 a single Prince George’s County primary care physician, on average, served 1,890 clients (State average is 1,120:1). 2022 Report also notes that in 2020 a single Prince George’s County dentist, on average, served 1,570 clients (State average is 1,260:1).

Trends in Primary care physicians in selected places



Trends in Dentists in selected places



Notes:
 The data in this table reflect the average population served by a single primary care physician.

Notes:
 The data in this table reflect the average population served by a single dentist.

Data Source: *County Health Rankings & Roadmaps* (available at <https://www.countyhealthrankings.org/explore-health-rankings>)
 Note: the data is 3 years behind because 2022 report provides 2019 data

- In discussion of the *County Health Rankings and Roadmaps* data, the Department stated that “survey data from the 2022 Community Health Assessment show that there is a perception by residents and community experts that there is a lack of providers in the County.”

- The Department’s feedback on the *County Health Rankings and Roadmaps* data is provided in response to the to the *FY 2024 First Round Budget Review Question No. 33*.
- Data to better understand the County-based capacity to meet healthcare service needs such as data on hospital utilization, use of the County-based emergency departments and information on urgent care facilities in the County has been requested as a part of the *FY 2024 Second Round Budget Review Questions*. However, the Department currently does not have such information available.
- Health Assures and serving the uninsured residents:
 - According to the PGC Health Connect data¹, between 90,000 and 96,000 of the County residents are currently uninsured. A significant portion of the uninsured are uninsurable, i.e. they do not qualify for any insurance including Medicare and Medicaid coverage.
 - The County’s Health Assures program used to be administered by the Healthcare Alliance, and it is now managed by the Department. The program provides funding for the uninsurable residents of the County who can receive services at six (6) Federally Qualified Health Centers (FQHC).
 - In FY 2022 the funding for the FQHCs has increased from \$250,000 to \$2.8 million due to the use of the American Rescue Plan funds. In FY 2023 funding increased to \$5.0 million and \$5.0 million is included in the FY 2024 Proposed Budget. These funds are included in the Non-Departmental portion of the budget and are funded by the American Rescue Plan (ARP) Act funds.
 - Additional information, including data on the number of patients by FQHCs is included in response to the *FY 2024 First Round Budget Review Questions No. 62-63* and the *FY 2024 Second Round Budget Review Question No. 23*.

Behavioral Health Division

- Multi-year funding data is provided in the accompanying table:

Behavioral Health Division								
	FY 2021 Actual	FY 2022 Budget	FY 2022 Actual	FY 2023 Budget	FY 2023 Est.	FY 2024 Proposed	FY 2023 BvE	FY 2024 P v FY 2023 E
General Fund	\$ 7,284,492	\$ 6,431,100	\$ 7,432,724	\$ 7,077,500	\$ 5,548,600	\$7,831,900	\$ (1,528,900)	\$2,283,300
Grant Funds	\$ 14,642,348	\$ 18,082,000	\$ 14,614,889	\$ 23,870,800	\$23,591,500	\$19,968,800	(279,300)	(3,622,700)
Total	\$ 21,926,840	\$ 24,513,100	\$ 22,047,613	\$ 30,948,300	\$29,140,100	\$27,800,700	(1,808,200)	(1,339,400)

- Behavioral Health Division's goals and priorities are:
 - Develop and implement a recovery-oriented, integrated system of care inclusive of behavioral health care providers, somatic care providers, and other entities instrumental for integrated health care.

¹ *PGC Health Connect FY 2022 Report* (available at https://www.pgchealthconnect.org/wp-content/uploads/2022/08/PGCHealthConnect_FY22-Final-Report.pdf)

- Maintain and expand behavioral health capacity of the County to meet the needs of the residents, including preventative, intervention, treatment, and recovery services.
- Expand the behavioral health crisis continuum in the County: crisis call processing/diversion; Mobile Crisis Response Teams; crisis stabilization facilities².
- Behavioral Health Division’s FY 2023 successes and achievements:
 - The Bridge Center at the Adam’s House has served, to date, 580 returning citizens, 182 veterans, and nearly 40 transitional-aged youth.
 - Working with the Totally Linking Care in Maryland (TLC-MD), the Health Department supported the 24/7 Mobile Response Dispatch, serving over 600 persons experiencing a behavioral crisis from October 10, 2022 until December 17, 2022.
 - The Department transitioned to a new mobile crisis response vendor, iMind Behavioral Health).
 - Working on expanding the crisis and acute care continuum including the opening of the new Luminis Health Doctors Community Medical Center facility and the implementation of a County Stabilization Center to divert behavioral health patients from local emergency departments.
 - The Department has temporarily provided behavioral health mobile response dispatch services for the Suicide Prevention Lifeline (988) calls and transitioned responsibility to the County vendor, Community Crisis Services, Inc. (CCSI).
- Key challenges and concerns are:
 - The Department reports that Prince George's County Local Behavioral Health Authority (LBHA) *“falls short of its ability to assure County residents have access to high-quality, comprehensive behavioral health services that meet the needs of the County. The Health Department does not have adequate resources to be successful in this effort.”*
- The County currently has six (6) Mobile Response Teams. Previously, the Department reported that eight (8) teams are needed to provide full coverage. It was previously reported that Totally Linking Care in Maryland (TLC-MD) funds four (4) teams and the remaining teams are paid by the General Funds.
- The COVID-19 pandemic led to interruptions of regular services and while the Division is moving forward to return to pre-pandemic service provision levels, critical vacancies restrict these efforts and there are still some service delays and longer wait times.
- With regards to the behavioral health bed capacity in the County, in FY 2023 the number of beds has increased to 98 from 68 beds in FY 2022. Additional details on the overall availability of behavioral health services in the County, including a map with the distribution of behavioral health providers is provided in responses to the *FY 2024 First Round Budget Review Questions No. 38 and 44*.

² For additional information please visit: <https://www.brookings.edu/blog/usc-brookings-schaeffer-on-health-policy/2022/01/06/building-a-sustainable-behavioral-health-crisis-continuum/> (Accessed April 13, 2023)

- The Department has been working with the Office of Homeland Security (specifically Public Safety Communications at the 9-1-1 Call Center), vendors, and other stakeholders by supporting the funding entity, Totally Linking Care in Maryland (TLC-MD), to implement the 9-1-1 Call Center Mental Health Diversion initiative. This program is currently being evaluated.
- County based Crisis Stabilization Center at Dyer
 - The Department reports that the first County based Crisis Stabilization Center at Dyer is expected to open in July 2023.
 - Generally, crisis stabilization facilities offer the community a no-wrong-door access to mental health and substance use care; operating much like a hospital emergency department that accepts all walk-ins, ambulance, fire and police drop-offs.
 - The Center will be operated a non-profit partner, RI international and will not be run by the Department.
 - The Center will have 16 chairs/reclines and no beds.
 - All financial support for the demolition and construction of the Center is being provided through the Health Services Cost Review Commission (HSCRC).
 - The Center will coast \$5-6 million a year to operate. No County funds are allocated to support the Center’s operations (\$256,732 was requested for FY 2024 and \$2.2 million will be requested in FY 2025). The Department reports that in FY 2024 the Center will be funded in part by the Totally Linking Care in Maryland (TLC-MD) HSCRC grant award of \$2.7 million. There is a funding gap of \$256,732 for FY 2024 and it is not clear how the operation costs will be met in the long run.
- The Health Department continues to serve as a critical provider and coordinator of re-entry services in the County through the work of the Bridge Center at the Adam’s House.
 - The Department provides 13 Grant Funded employees and offers an array of referral and some direct services (behavioral health, social services, transportation assistance, education, employment assistance, disability assistance, clothing assistance, legal help and other services).
 - 1,077 referrals for services/services were provided in FY 2023 to date, and 2,189 services/service referrals were made in FY 2022.
 - Additional details on the Bridge Center’s operations are provided in response to the *FY 2024 First Round Budget Review Question No. 49 (pages 36-39)* and the *FY 2024 Second Round Budget Review Question No. 17*.
- Additional information about the Behavioral Health Division's operations is provided in response to the *FY 2024 First Round Budget Review Questions No. 36-49 pages 23-39* and the *FY 2024 Second Round Budget Review Question No. 11-20 on pages 7-10*.

Health and Wellness Division

- Multi-year funding data is provided in the accompanying table:

Health and Wellness Division								
Division	FY 2021 Actual	FY 2022 Budget	FY 2022 Actual	FY 2023 Budget	FY 2023 Est.	FY 2024 Proposed	FY 2023 BvE	FY 2024 P v FY 2023 E
General Fund	\$ 2,324,070	\$ 1,757,300	\$ 2,006,401	\$ 1,912,700	\$1,913,800	\$1,978,100	\$1,100	\$64,300
Grant Funds	\$ 7,497,459	\$ 11,596,400	\$ 13,011,868	\$ 11,275,300	\$ 10,493,300	\$10,831,900	(\$782,000)	\$338,600
Total	\$ 9,821,529	\$ 13,353,700	\$ 15,018,269	\$ 13,188,000	\$12,407,100	\$12,810,000	(\$780,900)	\$402,900

- Health and Wellness Division's goals and priorities are:

“To enhance the health, safety and wellbeing of Prince Georgians through effective delivery of prevention, intervention, monitoring programs and access to care. Our vision remains the same, to mitigate adverse social determinants of health and to promote health equity across the County.”

- Health and Wellness Division’s FY 2023 successes and achievements:

- The Department’s Chronic Disease National Diabetes Prevention Program was the only Health Department in Maryland to achieve the Centers for Disease Control and Prevention Full Plus Recognition for programs that help prevent or delay Type 2 diabetes.
- The Chronic Disease Program was approved for a Medicaid number.
- Non-Emergency Medical Transportation program has successfully transitioned all County’s dialysis, rehabilitation centers, and nursing homes transportation processes electronically, which improved the wait times and streamlined trip scheduling.
- Adult Evaluation and Review Services program continues to assist the disabled individuals who are at risk of institutionalization by conducting comprehensive evaluations to identify services available to the individuals remain in the community or in the least restrictive environment.
- Through the Assistance in Community Integration Services, the Department partnered with community-based organizations to provide 2,021 housing and tenancy-based case management services to County residents who suffer from chronic health conditions, mental illness, addictions, those who are chronically homeless or at risk of homelessness or institutional placement.
- Community Health Worker Intervention Programs are designed to address social determinants of health. The programs include COVID Care Program, COVID Care Vaccine Program, Community Health Worker in the Library Initiative, Enhanced Care Management Program, PreventionLink, Community Health Integrated Service Systems, and Pathways to Health Equity.

- The Non-Emergency Medical Transportation program relies on staff to conduct screening to determine program eligibility (includes medical provider attestation of client’s eligibility). Once approved, client can call within 24 hours to schedule transport to their scheduled appointment. Every quarter redetermination for eligibility is required. This program is paid by the Maryland Department of Health and \$3.5 million was included in the FY 2023 budget. The same amount is included for FY 2024. Approximately 4,000 unduplicated clients were served in FY 2022 (excluding hospital discharges and

transfers) and nearly 50,000 trips were made. In FY 2023, as of February, 3,280 unduplicated clients were served and over 30,000 trips were made.

- Key challenges and concerns include:
 - Adult Evaluation and Review Services (AERS) program and the Nursing Monitoring (NM) program have not been able to meet the Maryland Department of Health (MDH) mandates for the completion of assessments. The Department clarifies, that MDH recommends that the AERS program conduct assessments within 15 days of receiving a referral. For both programs there has been a significant increase in demand, no additional staffing, and high vacancy rates. In response the *FY 2024 First Round Budget Review Question No. 53* estimates the current wait time at six (6) months for the NM and 4-5 months for AERS.
 - The Department reports that the Enhanced Case Management, the Administrative Care Coordination Unit, Non-Emergency Medical Transportation or Chronic Disease programs have resumed in-person home visits, vendor site visits, or in-person classes. Additional details on the Health and Wellness Division’s efforts to resume pre-COVID services are provided in response the *FY 2024 First Round Budget Review Question No. 53*.
- The Department plans to expand its programs and services to the most vulnerable residents; focus on filling vacant positions; and implement Community Health Workers Hub Initiative. In addition, the Department is considering services, which have been offered in the past, specifically offering breast and cervical cancer screenings at no cost to eligible women. The program would also provide education, diagnosis, treatment and patient navigation services.
- Additional information about the Health and Wellness Division's operations is provided in response to the *FY 2024 First Round Budget Review Questions No. 50-55 pages 39-49*.

Environmental Health/ Disease Control Division

- Multi-year funding data is provided in the accompanying table:

Environmental Health/ Disease Control Division								
Division	FY 2021 Actual	FY 2022 Budget	FY 2022 Actual	FY 2023 Budget	FY 2023 Est.	FY 2024 Proposed	FY 2023 BvE	FY 2024 P v FY 2023 E
General Fund	\$ 6,194,369	\$ 5,164,100	\$ 5,452,796	\$ 5,593,200	\$5,252,100	\$6,130,400	(\$341,100)	\$878,300
Grant Funds	\$ 916,335	\$ 673,500	\$ 993,668	\$ 622,800	\$ 1,116,100	\$1,139,500	\$493,300	\$23,400
Total	\$ 7,110,704	\$ 5,837,600	\$ 6,446,464	\$ 6,216,000	\$6,368,200	\$7,269,900	\$152,200	\$901,700

- Environmental Health/ Disease Control Division's goals and priorities are:

“to provide services to protect the public health and the environment and to efficiently investigate communicable and vector borne diseases. Priorities include risk-based food facility inspections, drinking water protection, protection of the waters of the State, reduction of public health nuisances and the investigations of communicable diseases according to the State and local mandates and protocols.”
- In CY 2022, the Division completed 2,939 food facilities inspections (out of required 5,676), 322 wells

inspections, 87 septic systems inspections, 725 swimming pool inspections, at least 94 food ruck inspections, 325 lead and asthma home visits and 127 percolation tests. A table comparing CY 2022 to CY 2021 performance is included in the response to the *FY 2024 Second Round Budget Review Question No.22*.

- Environmental Health/ Disease Control Division’s FY 2023 successes and achievements:
 - The Division worked with other County agencies and the Washington Suburban Sanitary Commission (WSSC) to finalize report on communities underserved and unserved by public sewer lines.
 - The Division works alongside with the Department of the Environment on the implementation of the Climate Implementation Plan.
 - The Lead and Asthma program continued to conduct home visits.
 - Contract process was changed for the Bay Restoration Fund contracts to expedite the review process.

- Key challenges and concerns include:
 - Department’s staff and clients have issues moving through the Momentum permitting and inspections system, and rely on Food Protection and Environmental Engineering staff for support. This additional administrative burden reduces the number of inspections staff are able to conduct. The Department reports that *“the Division also hopes that the Momentum system will be fully functional for permitting and electronic inspections; a functioning system will allow staff to focus on inspections and management instead of manual and administrative activities.”*
 - Due to the State data breach, the Communicable Disease investigation program personnel were not able to complete key deliverables. The staff are working to address the backlog.
 - The Division is working with the Human Resources team to fill vacant positions.

- The Environmental Health Services is working with the Maryland Department of Environment and Health to determine if a statewide permitting system can increase efficiencies.

- Additional information about the Environmental Health/ Disease Control Division's operations is provided in response to the *FY 2024 First Round Budget Review Question No. 58* and *FY 2024 Second Round Budget Review Question No.22*.

Family Health Services Division

- Multi-year funding data is provided in the accompanying table:

Family Health Services Division								
Division	FY 2021 Actual	FY 2022 Budget	FY 2022 Actual	FY 2023 Budget	FY 2023 Est.	FY 2024 Proposed	FY 2023 BvE	FY 2024 P v FY 2023 E
General Fund	\$ 7,284,492	\$ 6,431,100	\$ 7,432,724	\$ 7,077,500	\$5,548,600	\$7,831,900	(\$1,528,900)	\$2,283,300
Grant Funds	\$ 14,704,739	\$ 26,626,600	\$ 11,733,995	\$ 16,011,700	\$ 31,443,600	\$17,092,400	\$15,431,900	(\$14,351,200)
Total	\$ 21,989,231	\$ 33,057,700	\$ 19,166,719	\$ 23,089,200	\$36,992,200	\$24,924,300	\$13,903,000	(\$12,067,900)

- Family Health Services Division offers clinical and preventative services to women, children, and their families.
- Key goals and priorities for the Family Health Services Division are:
 - Filling vacant positions
 - Providing access to reproductive health services for all women regardless of their ability to pay
 - Reducing maternal and infant morbidity and mortality
 - Promote doula services for Medicaid beneficiaries
 - Reduce new HIV infections
 - Increase linkage to care for newly diagnosed HIV positive individuals
 - Decrease sexually transmitted infections by 10%
- Key accomplishments for FY 2023 include:
 - Working to reduce HIV infections and funding 10 organizations to expand HIV services
 - Implemented Monkeypox testing and vaccination site within a month to prevent an outbreak
 - Implemented pediatric telehealth network in partnership with the Prince George’s County Public Schools
 - Developed a plan to transition School Based Wellness Care to the Prince George’s County Public Schools in FY 2024
 - Implemented interim procedures for administering the Health Assures program in the absence of a vendor
 - Expanded dental services to adults and seniors
- Among additional initiatives the Division is considering are:
 - Becoming a host training site under the Health Resources & Services Administration (HRSA) for Nurse Practitioners that chose to be primary care providers in low resource communities. The Department notes that “*this is an ideal method to recruit providers that want to earn credit for loan forgiveness.*”
 - The Department would also like to develop and pilot an electronic pediatric network that would complement the work of the pediatric telehealth program.
- Additional information about the Family Health Services Division's operations is provided in response to the *FY 2024 First Round Budget Review Questions No. 59-61* and *FY 2024 Second Round Budget Review Question No.22*.

Equipment & Information Technology (IT)

- In FY 2023 the Department engaged a consultant firm to lead and analysis/audit of existing IT tools and applications in order to develop a formal strategy that will guide the Department’s IT office’s growth over the next 3-5 years. The final report has not been released, but the initial draft report was provided to the Department. Based on the findings and recommendations, in FY 2024 the Department will be working with the Office of Information technology to begin addressing the following issues:

- IT staff shortage
 - IT skills shortage
 - Lack of integrated health technology solutions resulting in inaccurate documentation of patient records
 - System failures and interruptions
 - Inadequate change management
 - Poor interoperability of data exchange
 - Poor oversight of IT contract management
 - Non-existent overall IT architecture and standards, and
 - Address IT security and disaster recovery
- The Department’s information technology needs are discussed in response to the *FY 2024 First Round Budget Review Questions No. 66-70*.

Facilities and the Capital Improvement Program (CIP)

- The total ‘footprint’ of the Department’s operations is provided in *Attachment F* to the *FY 2024 First Round Budget Review Questions*.
- Five (5) projects are included in the Proposed Capital Improvement Program Budget for FY 2024 – 2029: Cheverly Building Replacement, Clinical Health Facility, Health Facilities Renovations, Regional Health and Human Services Center, and Resident Treatment Facility.
 - The total cost of these projects is \$118,811,000 which represents an increase from \$107,073,000 reported last year (11% increase), and \$98,073,000 in the FY 2023 -2028 Approved CIP Budget (21% increase).
 - \$8,772,000 is proposed for the FY 2024
 - In FY 2024 the ongoing projects are funded through General Obligation Bonds (100%).
 - \$8,250,000 is proposed to be used for construction, and the remaining \$523,000 for equipment.
- Cheverly Building Replacement:
 - The facility to build and/or renovate a building to provide full service clinical, behavioral and dental health services.
 - The Proposed FY 2024-2029 CIP Budget Books identifies 9001 Edmonston Road, Greenbelt as the location site for this project. However, the Department in response to the *FY 2024 First Round Budget Review Question No. 74* noted that “*final decisions have not been made on the new location*”.
 - Total project cost is estimated at \$10 million, funded by the American Rescue Plan funds and anticipated to be completed in FY 2023.
- Clinical Health Facility:
 - The Clinical Health Facility will improve behavioral health services in the County by meeting the public’s clinical and mental health needs.
 - Location: 8118 Good Luck Road, Lanham.

- The total project cost remains at \$20 million. Funding source is identified as “other”. The project is anticipated to be completed in FY 2023.
- Health Facilities Renovations:
 - Health Facilities Renovations project includes various health facilities including the Dyer Health and the Health Administration building.
 - This is an on-going project and \$4.1 million is anticipated to be spent in FY 2023 and \$8.0 is budgeted for FY 2024. In FY 2024, this project is funded through General Obligation Bonds (100%).
 - Spending priorities for FY 2023 and FY 2024 are outlined in response to the *FY 2024 First Round Budget Review Question No. 73*.
- Regional Health and Human Services Center:
 - The Regional Health and Human Services Center will serve as a centralized location for the administrative functions of the Health Department, the Department of Social Services, and the Department of Family Services. Services for older adults, persons with disabilities and family caregivers, and a full-service senior activity center will be provided at this centralized location.
 - Location: 8800 Hampton Mall Drive, Capitol Heights.
 - The total project cost has increased slightly from \$57.3 million budgeted in FY 2023-2028 Approved CIP Budget to \$58.0 million included in the Proposed FY 2024-2029 CIP Budget.
 - The project is experiencing delays and project completion data was changed from FY 2022 to FY 2024. The Department anticipates this project to be completed by the summer/fall of 2024.
- Residential Treatment Facility:
 - This project will encompass a 40 bed residential treatment facility that will include detoxification, intermediate care and continuing care services for persons with substance abuse and mental health problems.
 - This project is being planned for beyond FY 2028, no site or project total cost have been identified.
- Overall, the Department continues to examine its facilities, including “*evaluating all leases to determine which ones can be consolidated or transitioned into either HHS facility or the Cheverly Replacement facilities once finalized*”.