



Budget Briefing: HHS - Population Health, Aging Services

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Briefing Topics

- Funding Sources
- Appropriations Areas
- Major Budget Topics
 - Population Health
 - Community Public Health Services and Health Policy
 - Family, Maternal, and Children's Public Health Services
 - Aging Services

Population Health and Aging Services

This is one of four briefings about the Department of Health and Human Services (DHHS) budget. See also an Overview briefing and other program area briefings on Human Services and on Medicaid/Behavioral Health.

- The **Public Health** portion of the DHHS budget provides funding to carry out provisions of the state Public Health Code (1978 PA 378) and national health priorities:
 - Prevent and control disease for all populations
 - Protect and promote human health for all populations
 - Address priority health issues of vulnerable populations
- The **Aging Services** portion of the DHHS budget provides funding for priorities established by the Older Michiganians Act (1981 PA 180) and the Older Americans Act:
 - Services and support for older persons in need and their families

Key Budget Terms

Fiscal Year: The state's fiscal year (FY) runs from October to September. FY 2022-23 is October 1, 2022 through September 30, 2023.

Appropriation: Authority to expend funds. An appropriation is not a mandate to spend. Constitutionally, state funds cannot be expended without an appropriation by the legislature.

Line Item: Specific appropriation amount that establishes spending authorization for a particular program or function in a budget bill.

Boilerplate: Specific language sections in a budget bill that direct, limit, or restrict line item expenditures, express legislative intent, and/or require reports.

Lapses: Appropriated amounts that are unspent or unobligated at the end of a fiscal year. Appropriations are automatically terminated at the end of a fiscal year unless designated as a multi-year work project under a statutory process. Lapsed funds are available for expenditure in the subsequent fiscal year.

Note: Unless otherwise indicated, historical budget figures in this presentation have not been adjusted for inflation.

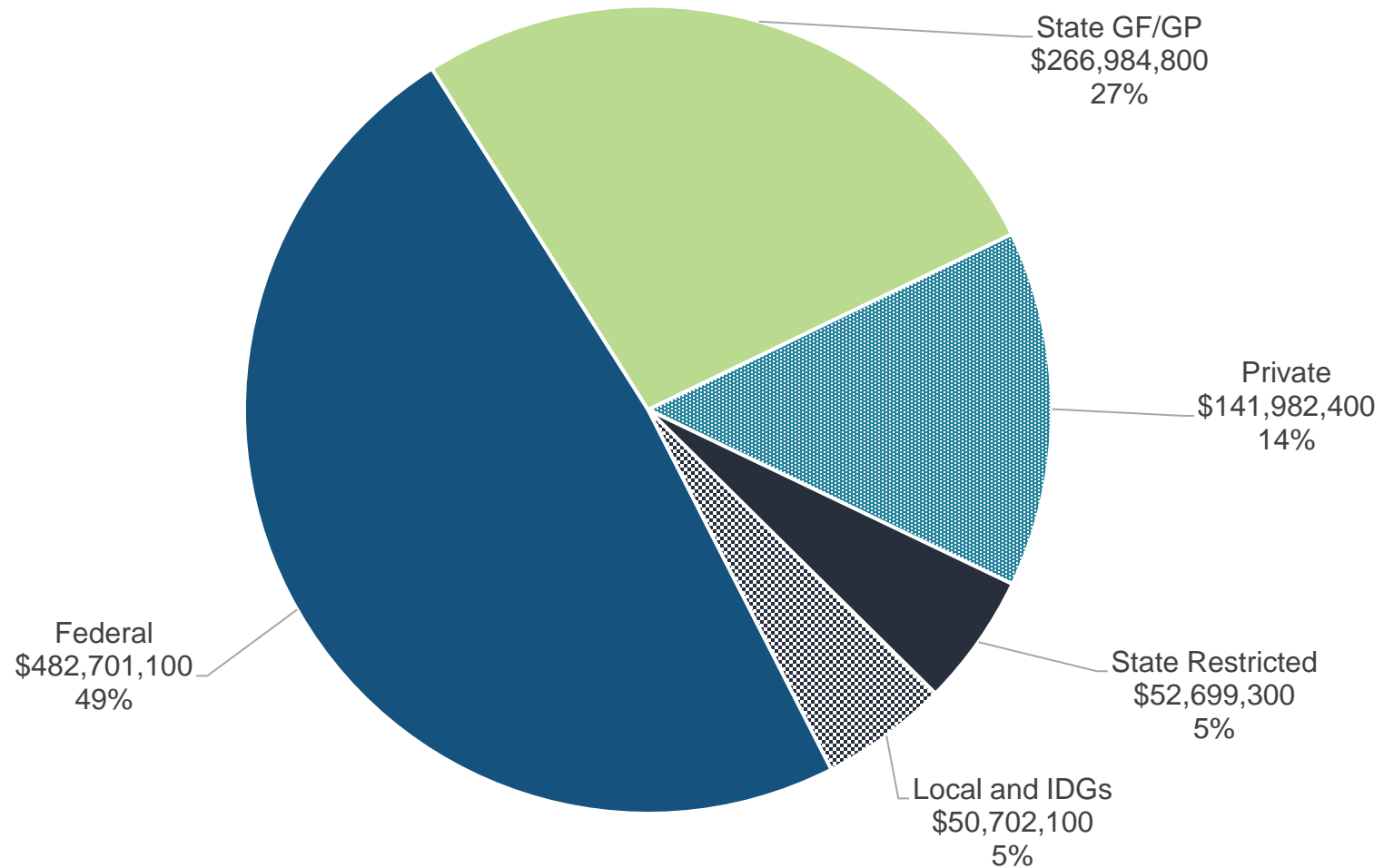
Funding Sources

FY 2022-23 Budget for Population Health and Aging Services

Fund Source	Funding	Description
Gross Appropriations	\$995,069,700	Total spending authority from all revenue sources
Interdepartmental Grants (IDG) Revenue	2,734,400	Funds received from state departments of Licensing and Regulatory Affairs, Environmental Quality, and Treasury for services provided
Adjusted Gross Appropriations	\$992,335,300	Gross appropriations excluding IDGs; avoids double counting when adding appropriation amounts across budget areas
Federal Revenue	482,701,100	Federal grant or matching revenue, including block grants for preventive health and health services, and for maternal and child health services, and numerous grants dedicated to specific programs or purposes
Local Revenue	47,967,700	Revenue received from local units of government for state services, including funds from school districts originating from the State School Aid Fund
Private Revenue	141,982,400	Revenue from individuals and private entities, including grants, donations, contributions, and manufacturer rebates
State Restricted Revenue	52,699,300	State revenue restricted by the State Constitution, state statute, or outside restriction that is available only for specified purposes; including user and licensing fee revenue, and numerous special funds
State General Fund/General Purpose (GF/GP) Revenue	\$266,984,800	Unrestricted revenue from taxes and other sources available to fund basic state programs and other purposes determined by the legislature

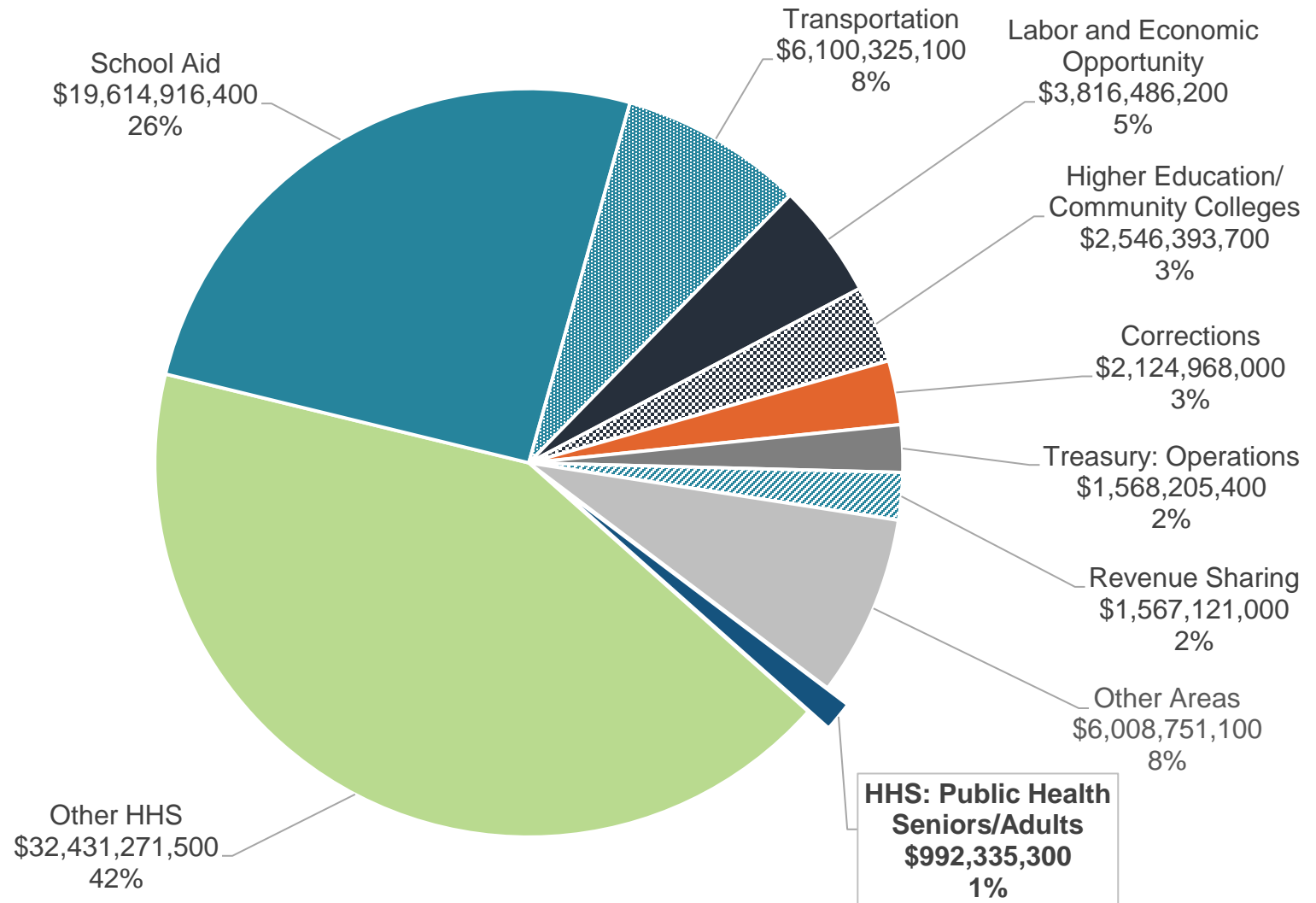
FY 2022-23 Fund Sources for Population Health and Aging Services

Of the **\$995.1 million** population health and aging budget **49%** is funded by federal revenue, including block grants and grant awards for food programs, AIDS/HIV care, WIC supplemental food, senior community services, immunization, and other programs.



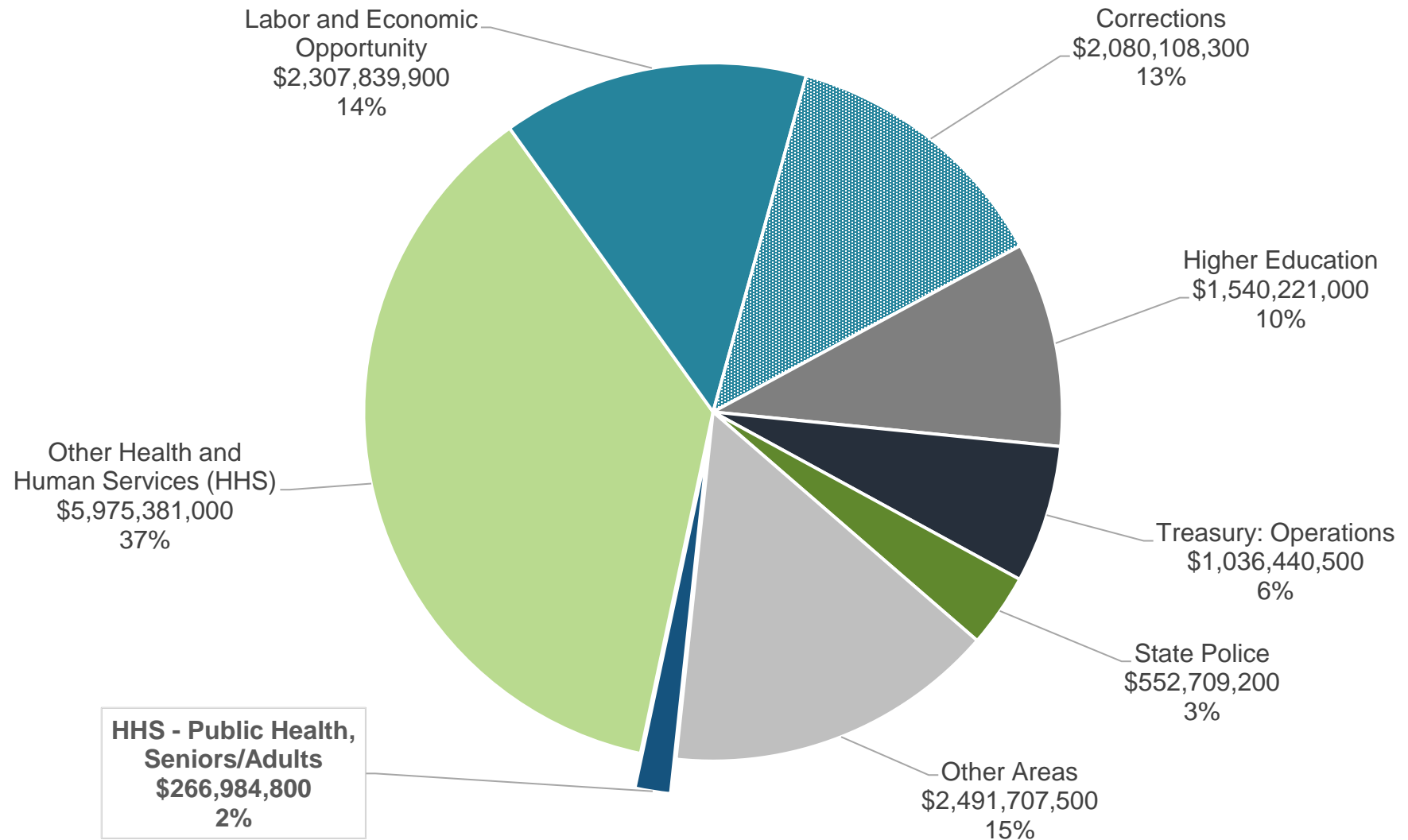
Share of Total State Budget - Population Health and Aging Services

The population health and aging services budget represents **1%** of the **\$76.8 billion** state budget (adjusted gross) for FY 2022-23.



Share of Total State GF/GP Budget - Population Health and Aging Services

The population health and aging and adult services budget represents **2%** of the state's **\$16.3 billion** GF/GP budget for FY 2022-23.



Appropriation Areas

Population Health and Aging Services Appropriation Areas

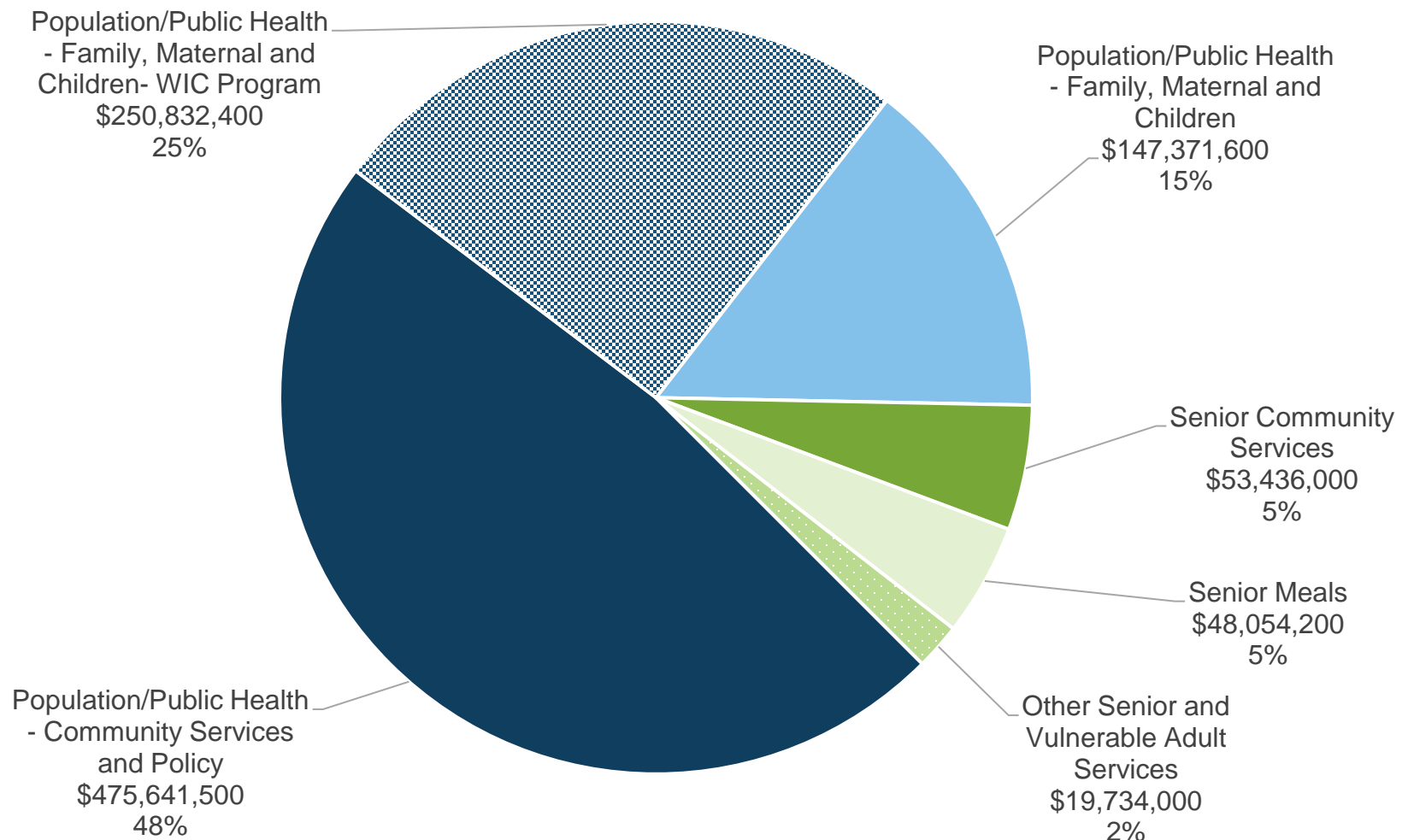
Population Health/Public Health- Community Services and Policy: Funds essential health services, infectious disease control and care, childhood lead program, chronic disease prevention and health promotion, and research programs; monitors abnormal lead levels, PFAS, and other environmental contamination; supports the emergency medical services program

Population Health/Public Health- Family, Maternal, and Children: Offers dental programs, child and adolescent health, and immunization; assists with lead investigation and abatement; funds WIC project FRESH farmer's market nutrition program and WIC administration

Aging Services: Provides senior community-based and in-home programs; funds senior home-delivered and congregate meals; assists with senior employment, volunteer, and respite care services

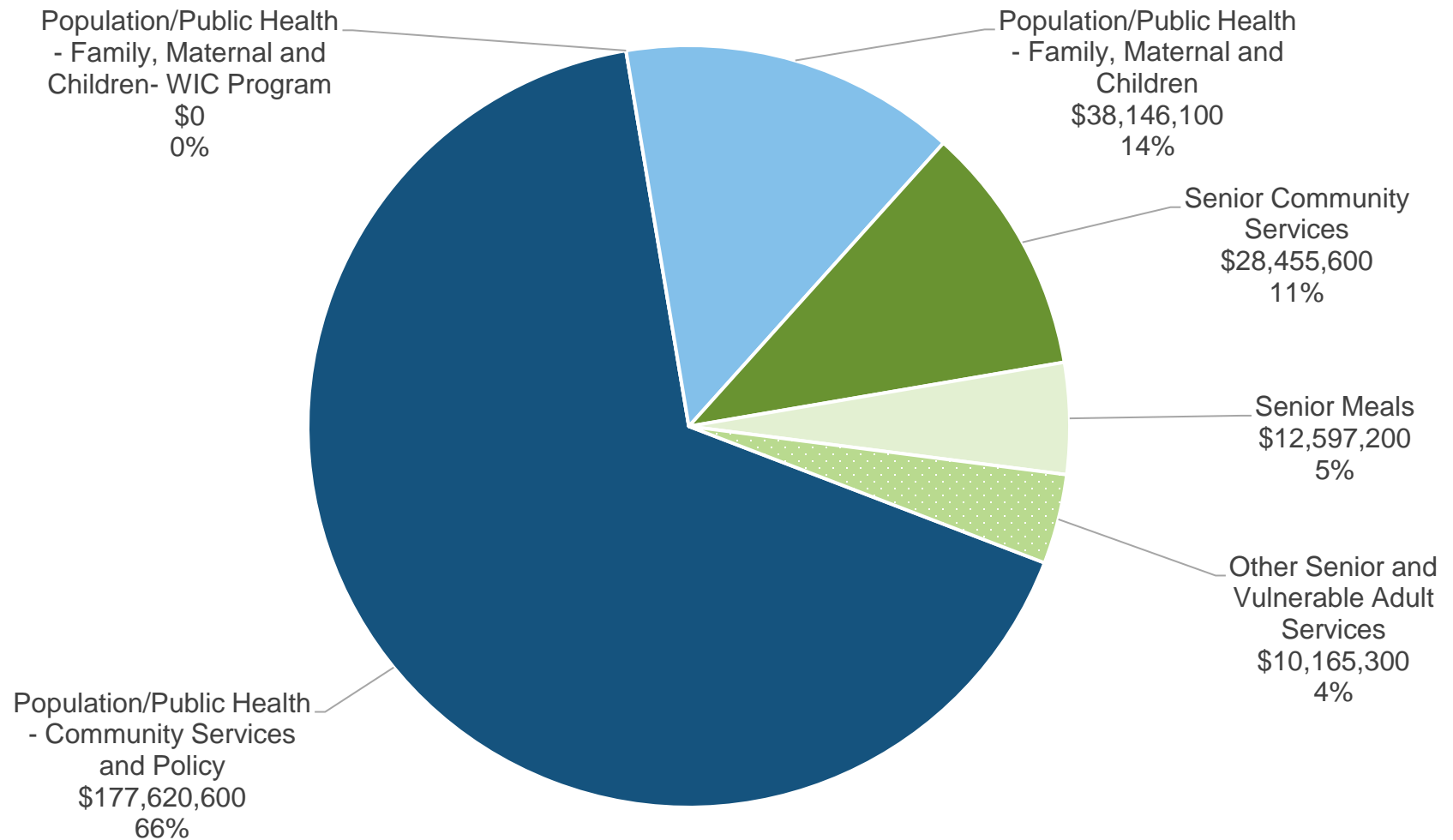
FY 2022-23 Gross Appropriations by Areas for Population Health and Aging Services

Of the **\$995.1 million** **12%** supports aging services, **48%** supports population health community services and policy, and **25%** supports the Women, Infants, and Children (WIC) Supplemental Food Program.



FY 2022-23 GF/GP Appropriations by Areas for Population Health and Aging Services

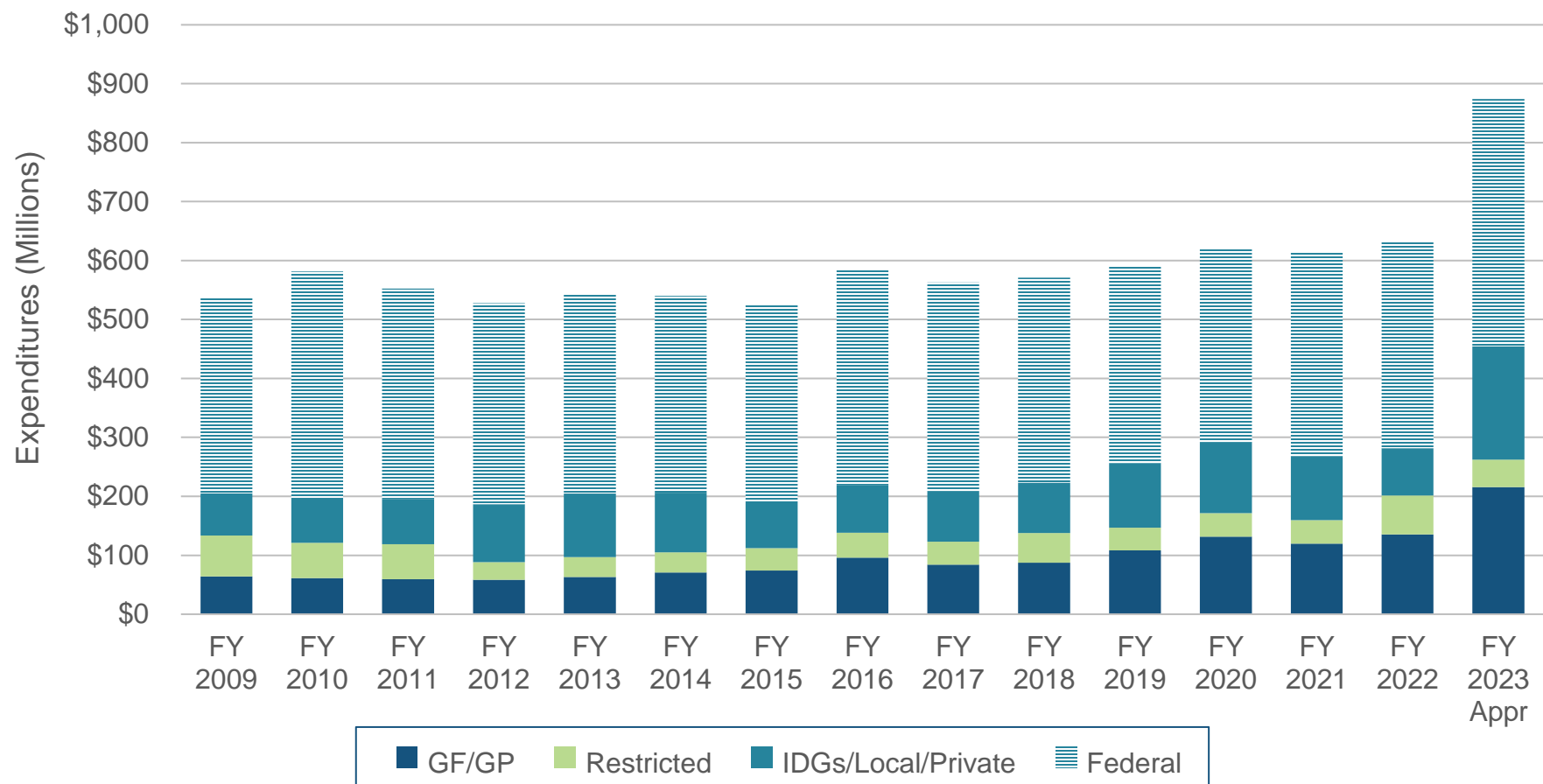
Of the **\$266.9 million** GF/GP, **\$228.8 million** is more heavily concentrated in population health community services and policy and aging services than Gross appropriations.



Major Budget Topics – POPULATION HEALTH

Spending History for Population Health

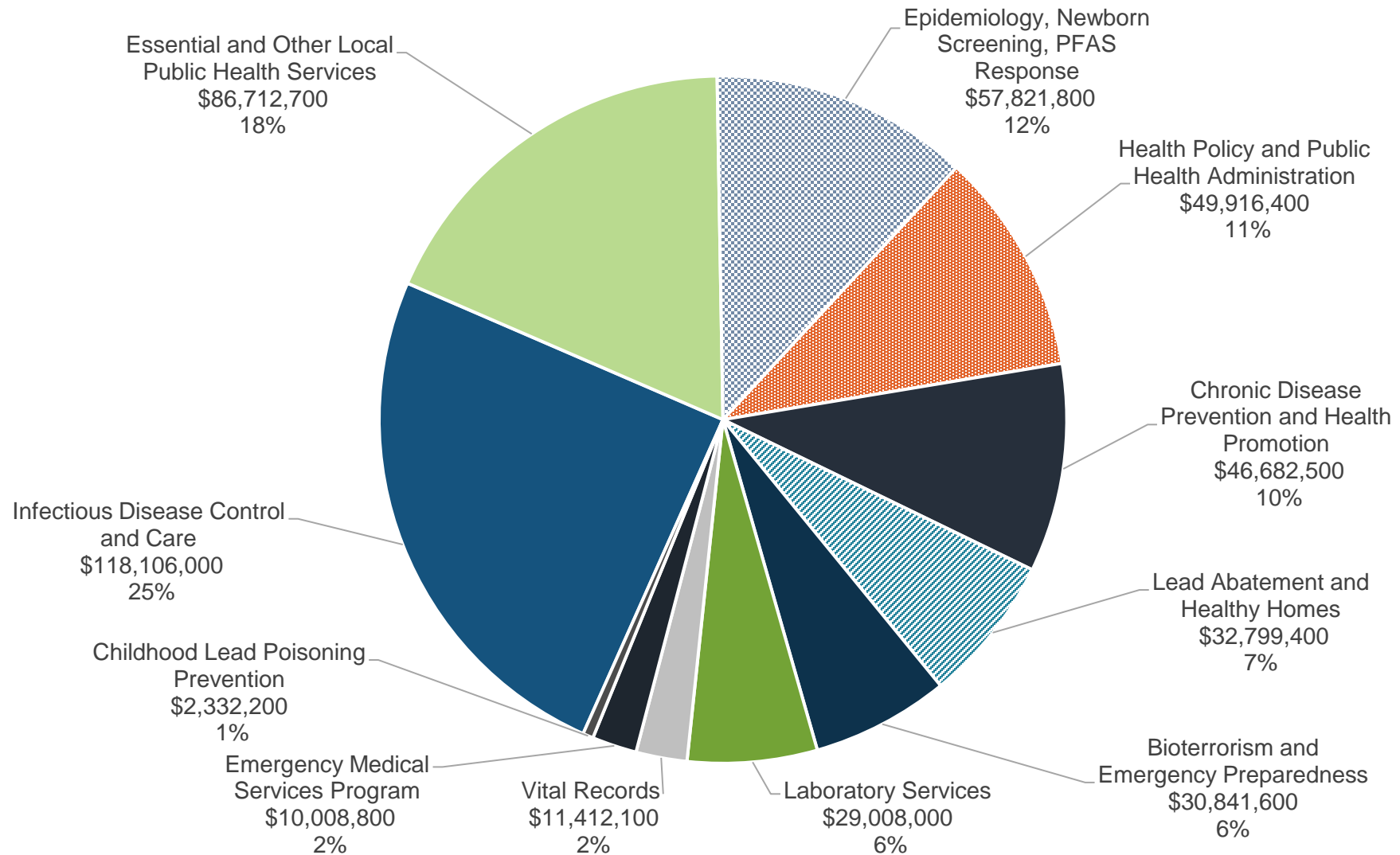
FY 2022-23 appropriations of **\$873.8 million** for population health include continued state-funded expansion of WIC supplemental food programming, chronic disease prevention, and one-time appropriations of **\$49.1 million** Gross. FY 2021-22 funding was expended at **77.9%** of the original **\$812.6 million** appropriation.



Note: Amounts shown for FY 2008-09 through FY 2010-11 include health regulatory and licensing functions, transferred to Department of Licensing and Regulatory Affairs in 2011.

Overview By Program FY 2022-23 for *Community Public Health Services*

The DHHS population health budget includes **\$475.6 million** Gross (**\$177.6 million** GF/GP) for the following community public health programs.

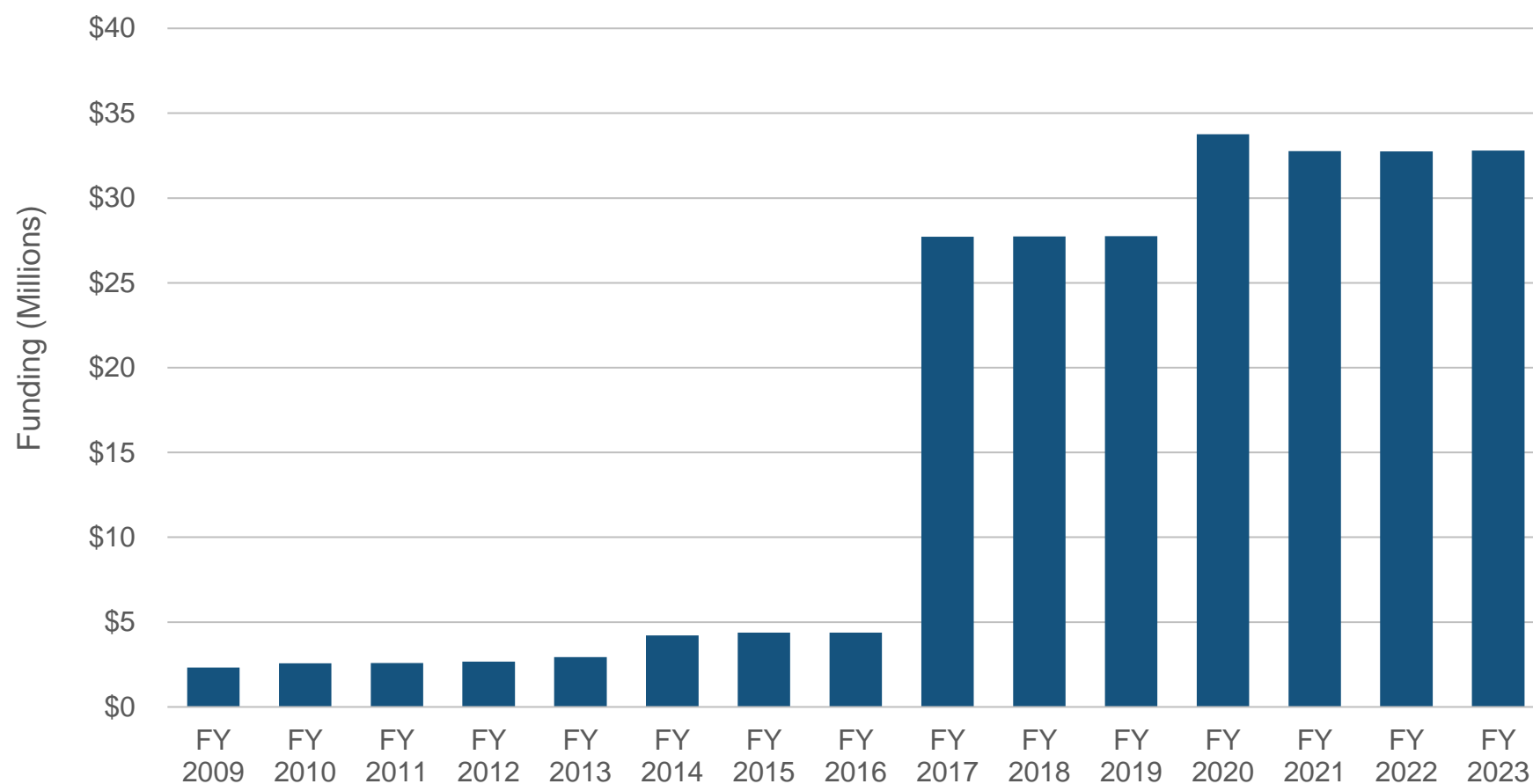


Lead Abatement and Healthy Homes Program

- Healthy Homes Program started in 1996 to assist with the removal of lead hazards in older homes. The program also aids in the prevention of childhood poisoning, asthma, and unintentional injuries.
- There are fourteen targeted communities:
 - Battle Creek, Benton Harbor, Dearborn, Detroit, Flint, Grand Rapids, Hamtramck, Highland Park, Jackson, Kalamazoo, Lansing, Muskegon, Pontiac, and Saginaw
- Over the course of the program, DHHS has funded over **2,500** housing unit abatements with combined federal and state funds.
- In 2017, funding was expanded through unexpended Children's Health Insurance Program (CHIP) administrative funds. These funds were approved for five years, or until all designated homes have been abated. Funds have been used for lead abatement practices in Flint and other high-risk communities.

Funding History – Lead Abatement and Healthy Homes

Lead Abatement and Healthy Homes funding has grown since FY 2016-17. Additional supplemental funding was provided in FY 2016-17 to help with lead abatement practices in Flint and other high-risk communities. CHIP unexpended funds are used to support increased funding for the following fiscal years.

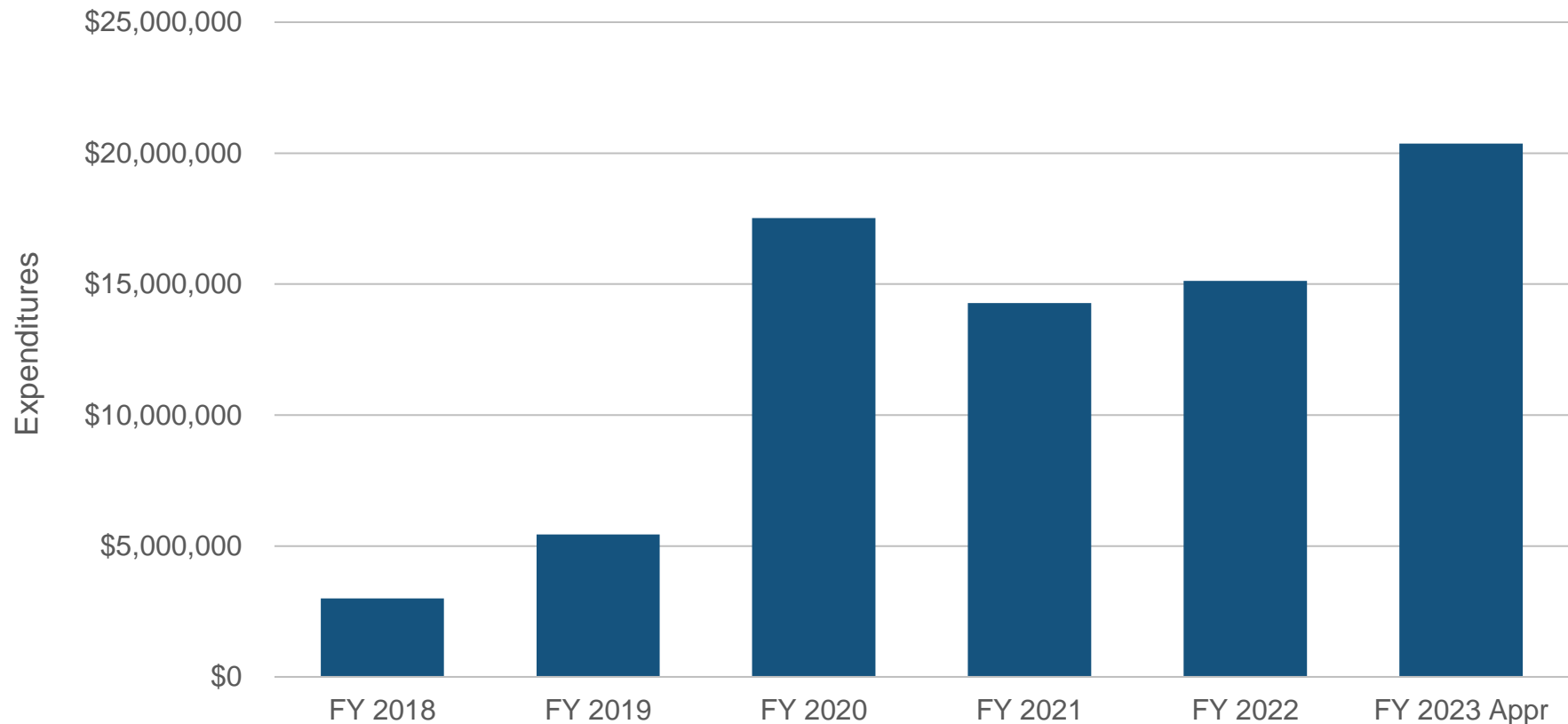


PFAS and Environmental Contamination Response

- PFAS is a man-made chemical that does not break down naturally and can be found in water supplies, fish, and deer.
- Funding for PFAS was originally introduced through a supplemental appropriation in FY 2017-18. The following fiscal year, DHHS supported new funding towards PFAS laboratory testing and analysis to address the emerging public health crisis. Funds are also used to provide alternative water sources or water filters, outreach, and environmental and well sampling tests.
- EGLE also receives funds to assist with PFAS through environmental remediation and redevelopment practices.
- The Michigan PFAS Action Response Team (MPART) was also created to develop protocols to mitigate the issue. Members of MPART include the directors of EGLE, DHHS, MDARD, DNR, MDOT, LARA, and DMVA.

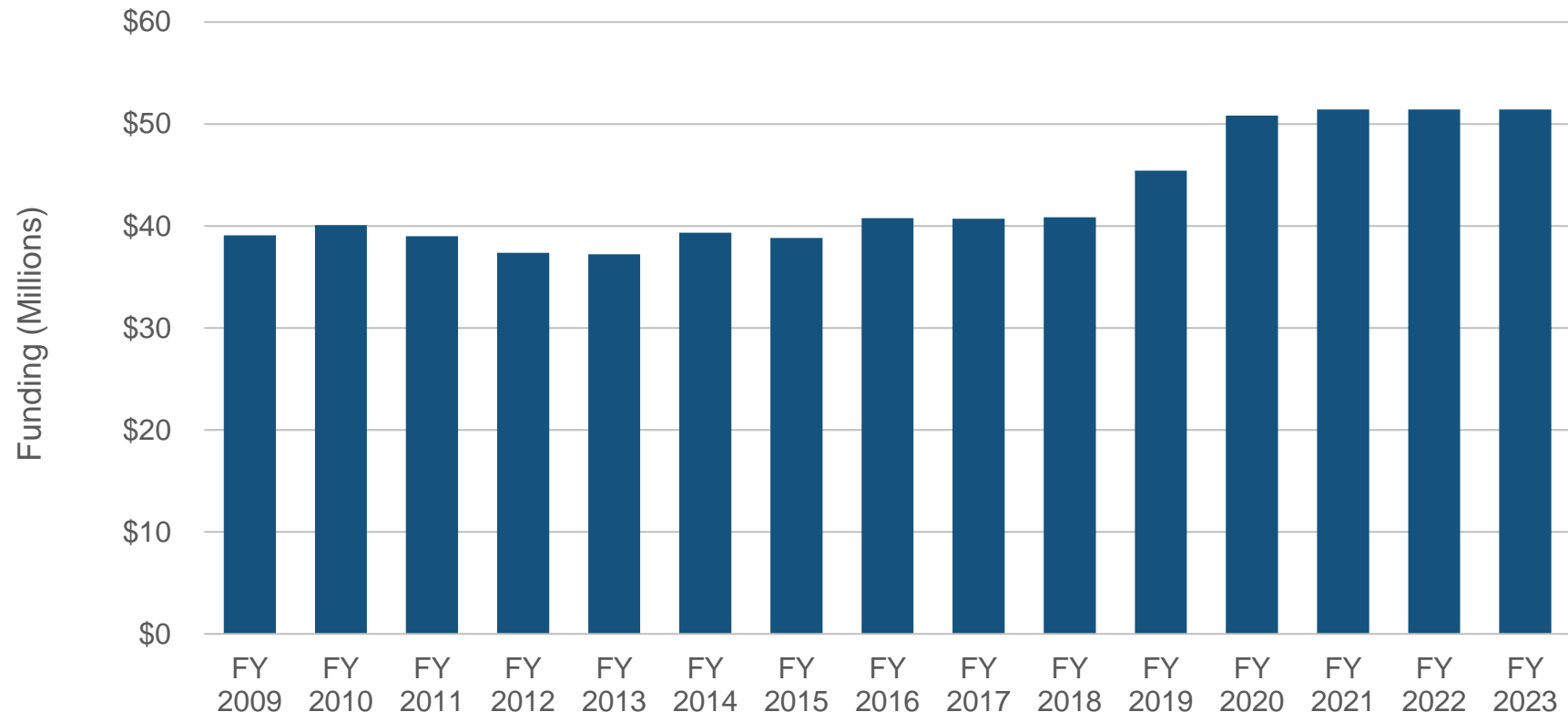
Spending History – PFAS and Environmental Contamination Response

PFAS and Environmental Contamination and Response funding is **100% GF/GP**.
Expenditures in FY 2021-22 were **74.6%** of the original **\$20.3 million** appropriation.



Funding History – Essential Local Public Health Services

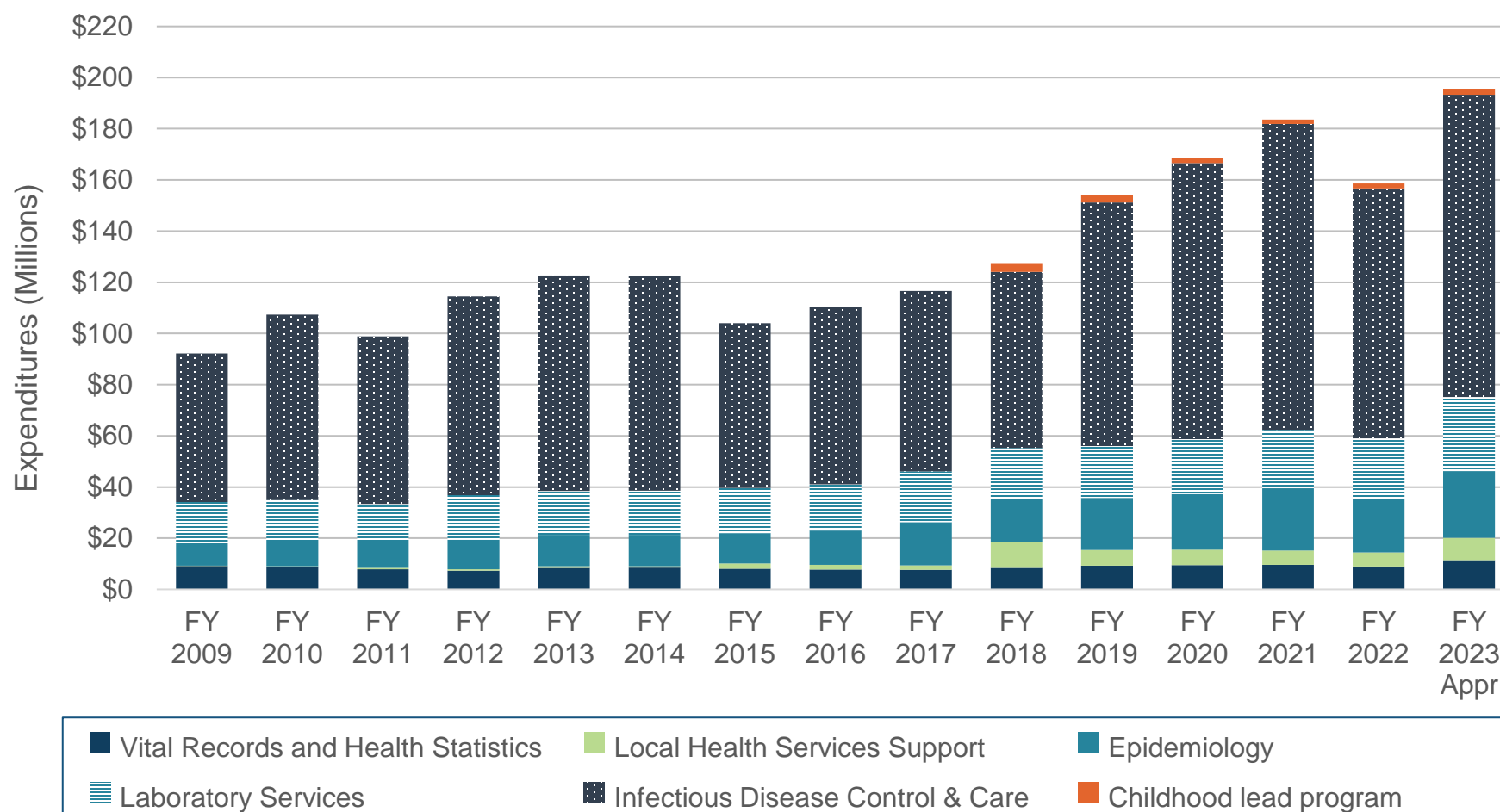
Essential Local Public Health Services funding is distributed to local health departments to support required local public health services including infectious disease control, food and water protection, and hearing and vision screening for school children. Funding is **90% GF/GP**. A new distribution formula was implemented beginning FY 2019-20. Funding has remained the same from FY 2020-21 through FY 2022-23.



Note: Public Act 616 of 2018 established a new \$10 million annual allocation of use tax funding to local health departments for essential services, paid through the Local Community Stabilization Authority beginning November 2019. This amount is not part of the state budget.

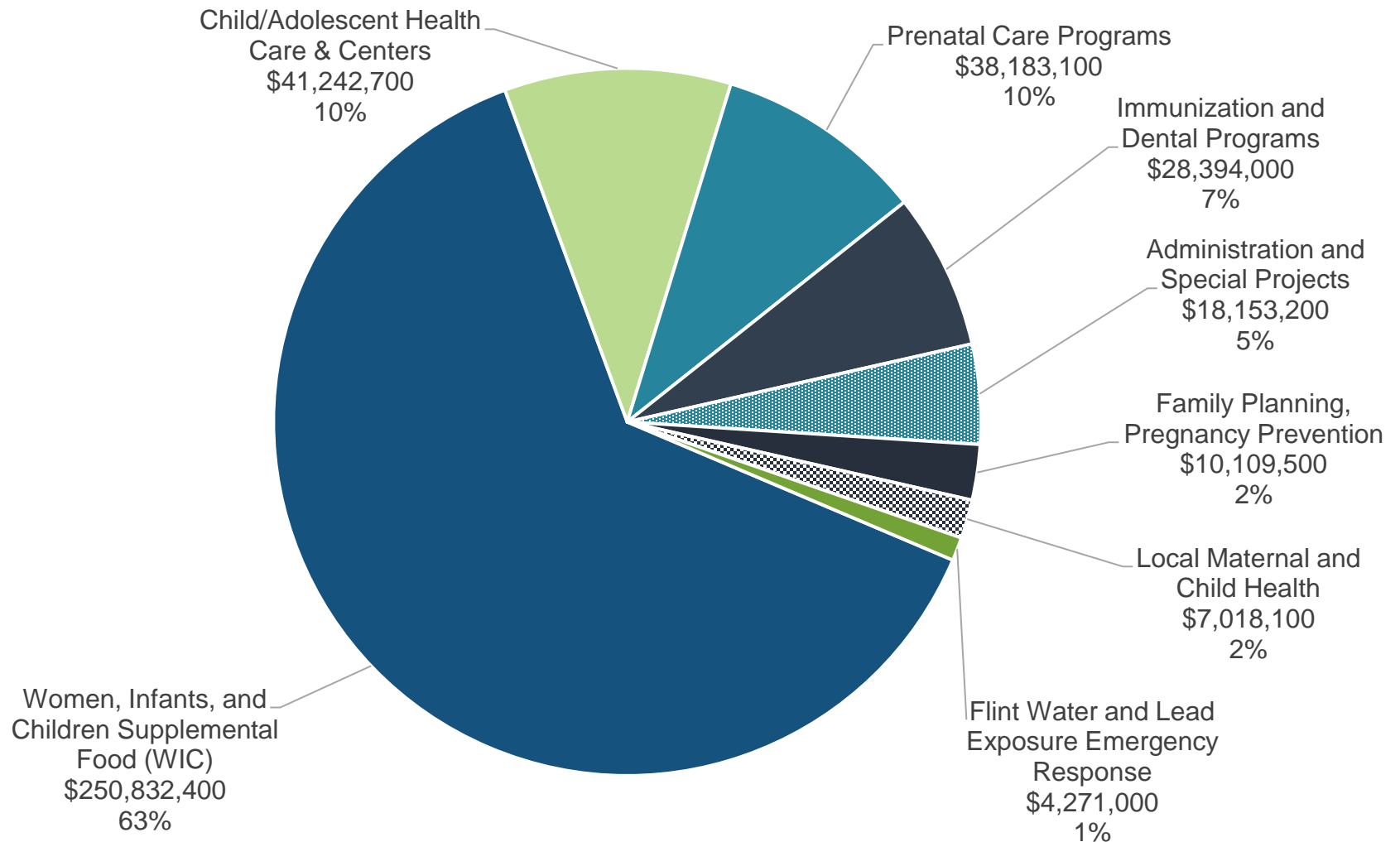
Spending History by Program Areas – Other Key Population Health Services

Funding for other key state and local population health functions has grown. However, expenditures in FY 2021-22 were **82.1%** of the original **\$190.9 million** appropriation. Recent FY 2022-23 increases include vital records, epidemiology, and laboratory services.



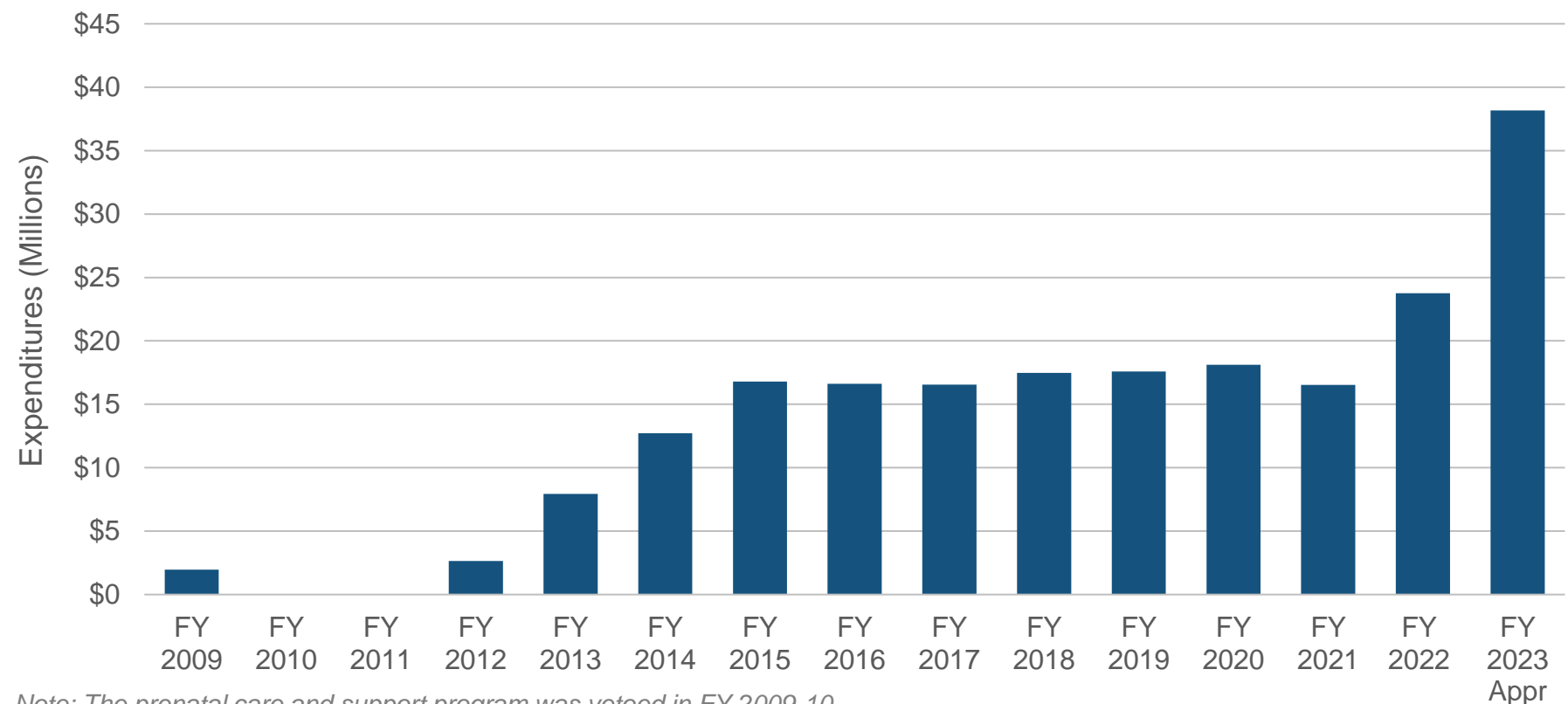
Overview By Program FY 2022-23 for *Family, Maternal, and Children's Public Health*

The DHHS population health budget includes **\$398.2 million** Gross (**\$38.1 million** GF/GP) for the following family, maternal, and children's public health services.



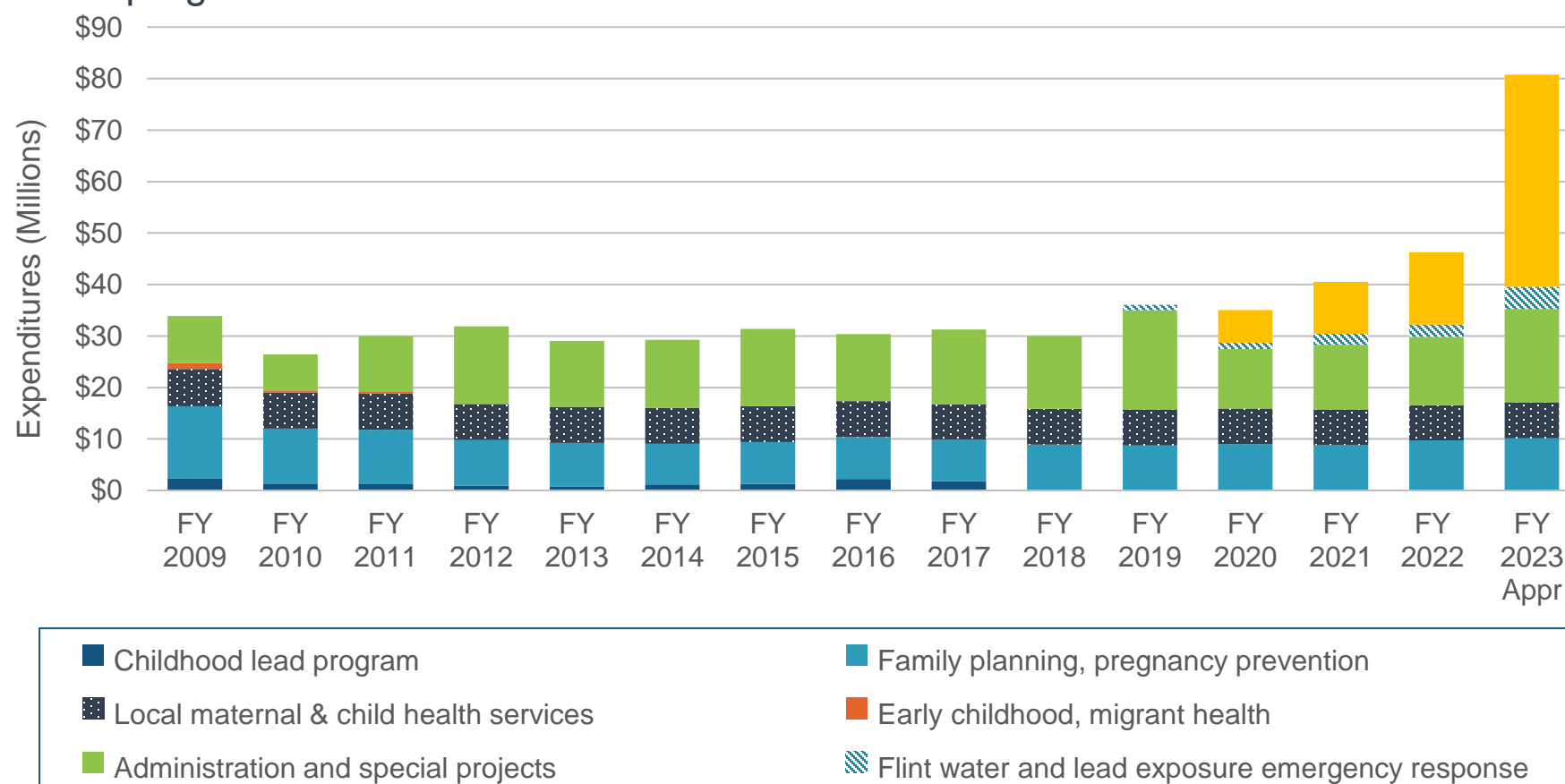
Spending History - Prenatal Care and Outreach Support

Prenatal Care and Outreach Support funding is used towards prenatal home-visiting programs, including Healthy Families America, Family Spirit, and Nurse-Family Partnership, to support pregnant women and teenagers through pregnancy, and for infant mortality reduction programs. During FY 2020-21, there were **142,930** home visits and **21,496** families served. Expenditures for FY 2021-22 were **64.5%** of the original **\$36.8 million** appropriation.



Spending History by Program Areas - Family, Maternal, and Children's Public Health

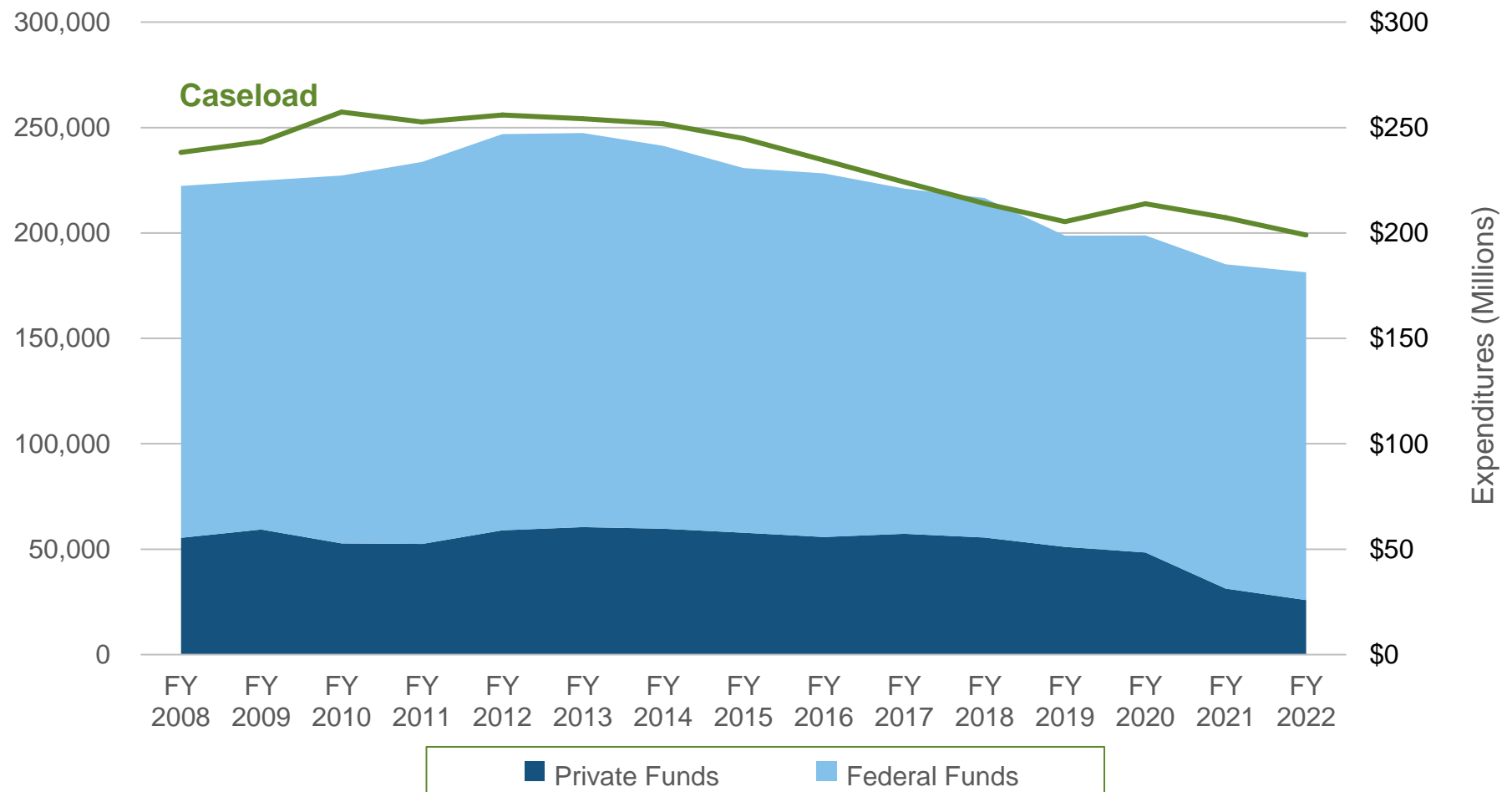
Further investment in new initiatives for child and adolescent health services, Healthy Moms Healthy Babies programming, and Flint water and lead exposure emergency continues an upward funding trend for public health family, maternal, and children's health programs.



Note: The childhood lead program was transferred to population health – community services and policy in FY 2017-18.

Women, Infants, and Children (WIC) Special Supplemental Food and Nutrition Program

WIC caseloads continue a pattern of decline, averaging **198,987** participants in FY 2021-22. Expenditures for federal funds and infant formula manufacturer rebates supporting supplemental food benefits for nutritionally at-risk mothers, infants, and small children were **78%** of the original **\$231.3 million** appropriation.

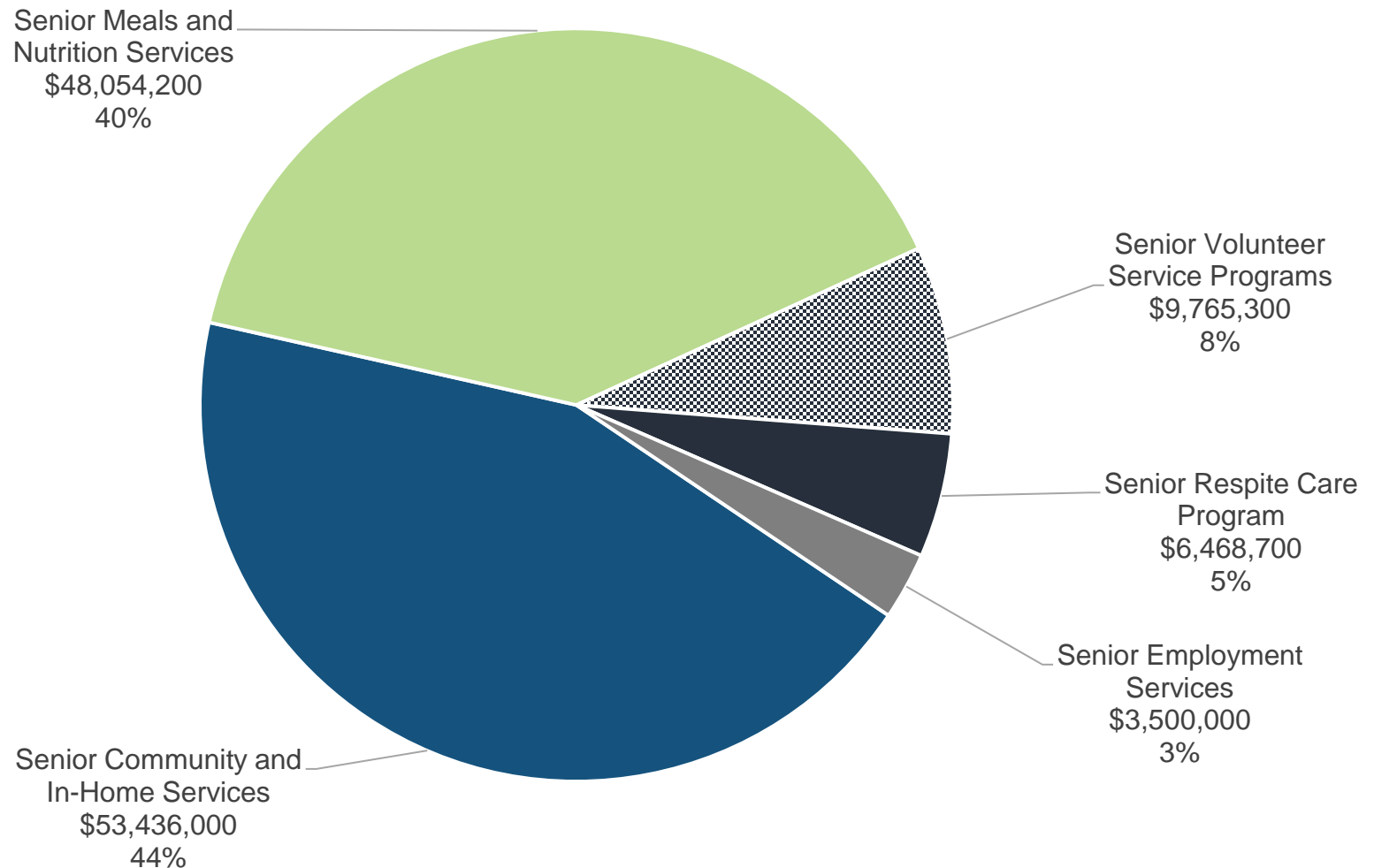


Major Budget Topics – AGING SERVICES

Overview By Program FY 2022-23

Aging Services

The DHHS budget includes **\$121.2 million** Gross (**\$51.2 million** GF/GP) for aging services, appropriated to the following program areas. FY 2022-23 removes aging and adult administration appropriation from the aging services budget.



Key Aging Services Programs

Senior Community and In-Home Services

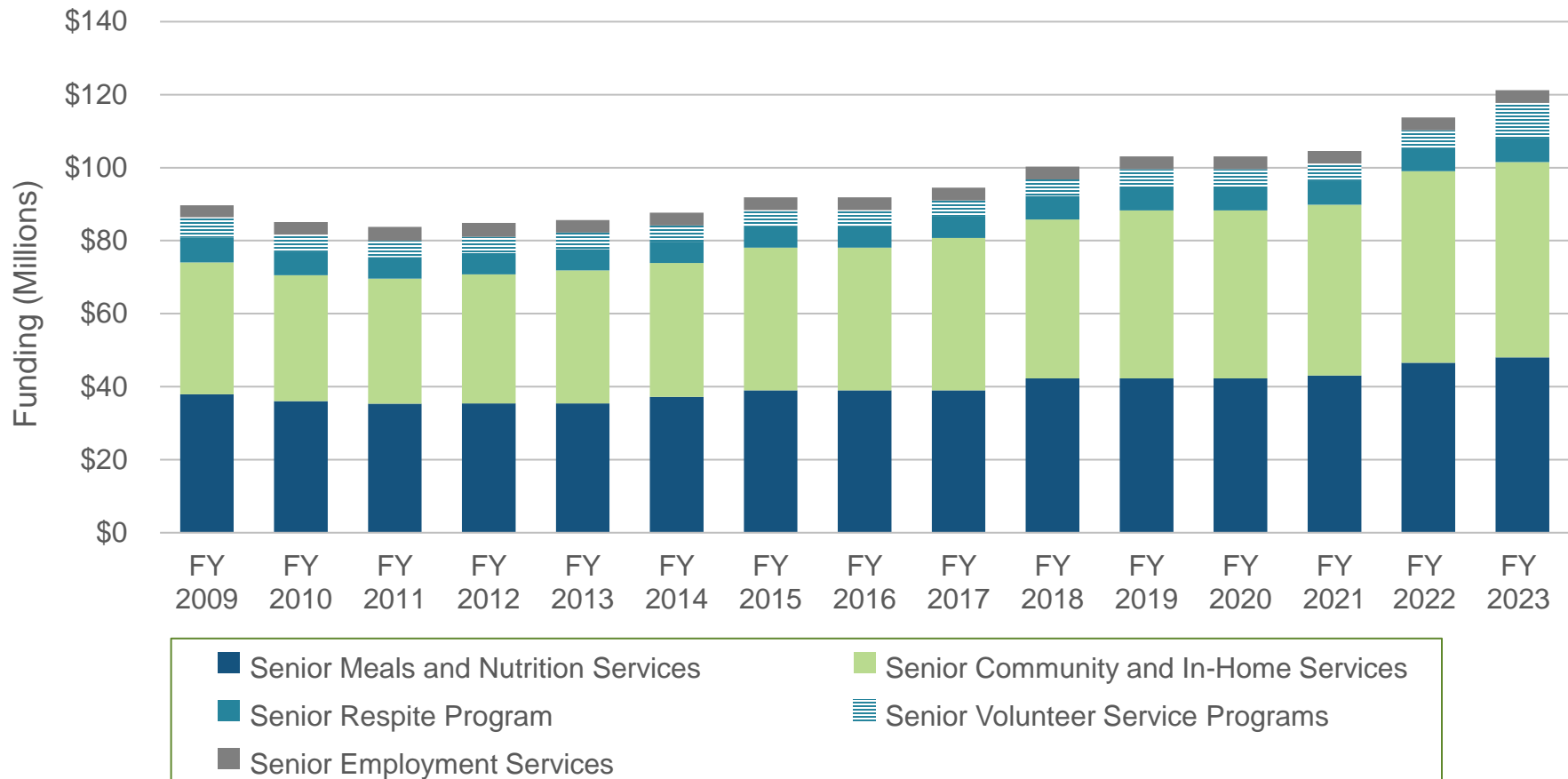
- Funds are used for services to facilitate senior independence. Services include elder abuse prevention and treatment training, preventative health services, family caregiver support program, counseling, legal assistance, and in-home assistance. The funding in FY 2020-21 assisted with:
 - Providing nearly **3,000** elderly with in-home services
 - Training over **4,600** individuals in elder abuse prevention and treatment
 - Providing more than **7,150** seniors with access to legal assistance
 - Advocating for and educating over **9,700** long-term care residents

Senior Meals and Nutrition Services

- Provides vulnerable seniors with at least one nutritional meal each day. Funds are also used towards nutrition education, group meals, and Senior Project FRESH Farmer's Market Nutrition Program. In FY 2020-21, there were **4,309** individuals who received home-delivered meals or referred to other assistance programs.

Funding History for Aging Services

Aging services has experienced a steady increase in funding for senior programs including community and in-home services and meals and nutrition services.



Note: The Aging and Adult Administration was transferred to the Medical Services Administration. Funding trends for the Aging and Adult Administration are no longer reflected in the funding history for Aging Services.

For more information about the DHHS Population Health or Aging Services budget:

HFA Resources

<http://www.house.mi.gov/hfa/HealthandHumanServices.asp>

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