



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 2024-25 is October 1, 2024 through September 30, 2025.

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.

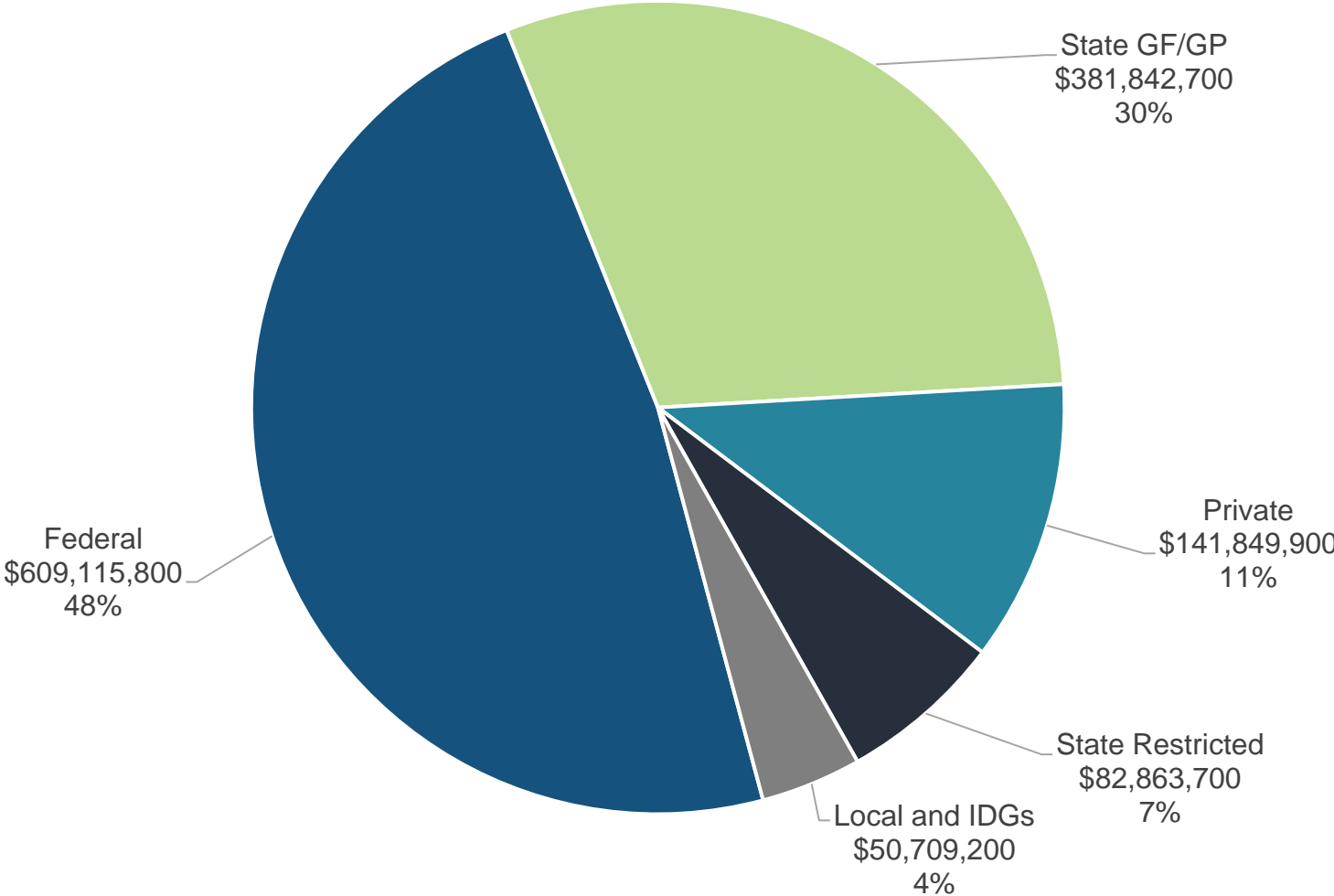
Funding Sources

FY 2024-25 Budget for Population Health and Aging Services

Fund Source	Funding	Description
Gross Appropriations	\$1,266,381,300	Total spending authority from all revenue sources
Interdepartmental Grants (IDG) Revenue	2,741,500	Funds received from state departments of Licensing and Regulatory Affairs, Environmental Quality, and Treasury for services provided
Adjusted Gross Appropriations	\$1,263,639,800	Gross appropriations excluding IDGs; avoids double counting when adding appropriation amounts across budget areas
Federal Revenue	609,115,800	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	141,849,900	Revenue from individuals and private entities, including grants, donations, contributions, and manufacturer rebates
State Restricted Revenue	82,863,700	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	\$381,842,700	Unrestricted revenue from taxes and other sources available to fund basic state programs and other purposes determined by the legislature

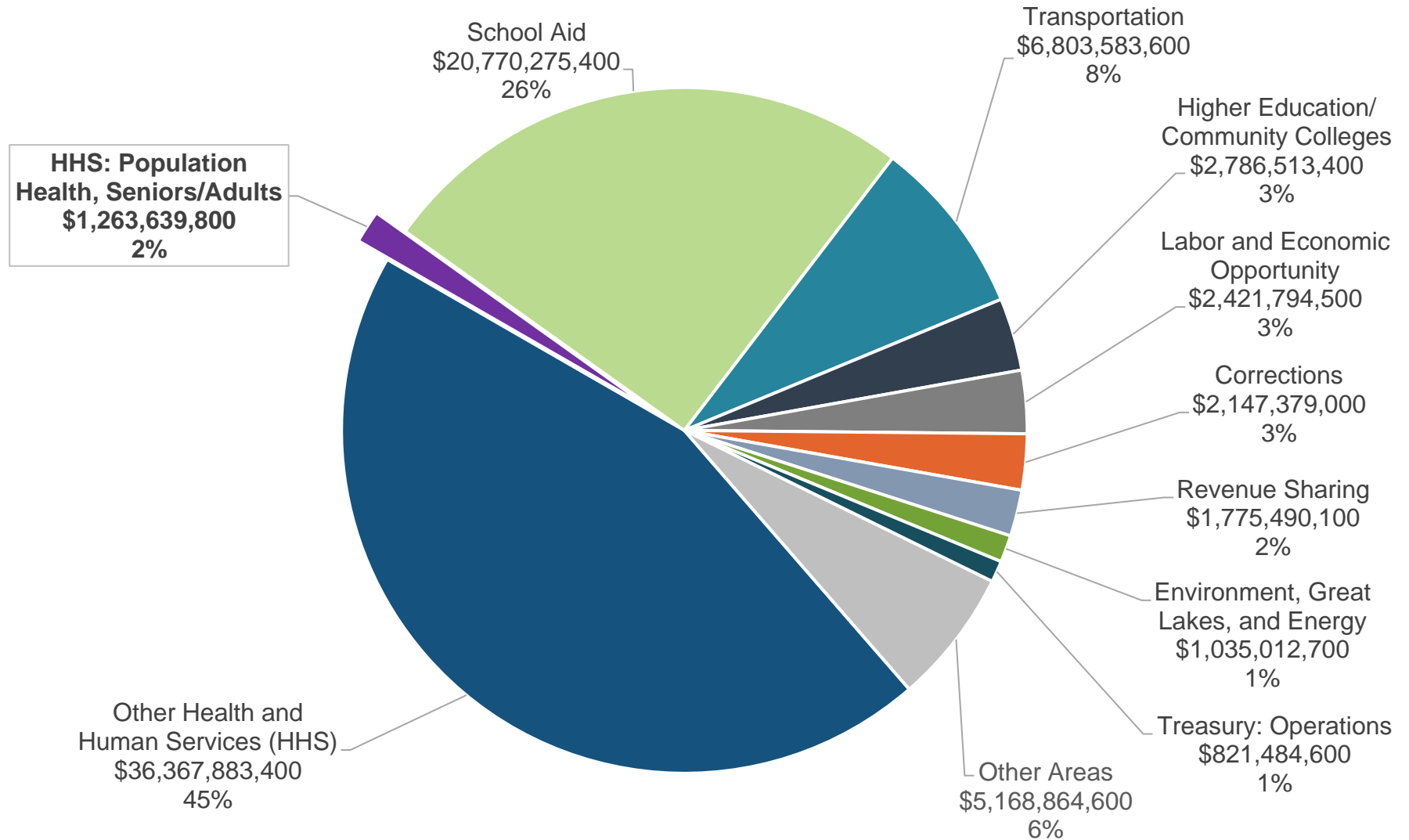
FY 2024-25 Fund Sources for Population Health and Aging Services

Of the **\$1.3 billion** population health and aging budget **48%** 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.



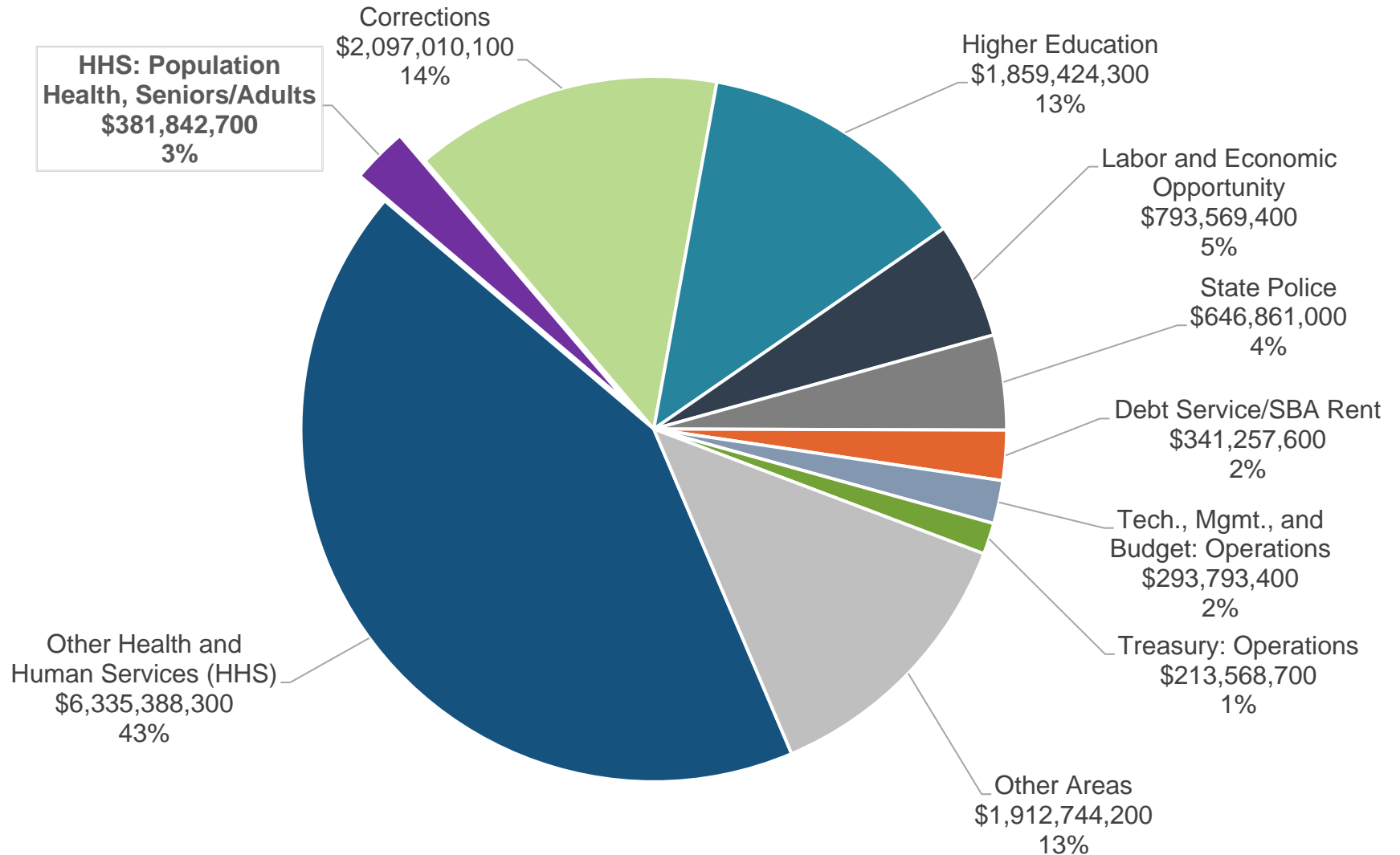
Share of Total State Budget - Population Health and Aging Services

The population health and aging services budget represents **2%** of the **\$81.4 billion** state budget (adjusted gross) for FY 2024-25.



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

The population health and aging and adult services budget represents **3%** of the state's **\$14.9 billion** GF/GP budget for FY 2024-25.



Appropriation Areas

Population Health and Aging Services Appropriation Areas

Health and Human Services Policies and Initiatives: Funds cellular therapy, certificate of need, child advocacy centers, crime victims' services, rape prevention, and domestic violence services

Epidemiology, Emergency Medical Services, and Laboratory- Funds childhood lead program, and research programs; monitors abnormal lead levels, PFAS, and other environmental contamination; supports the emergency medical services program

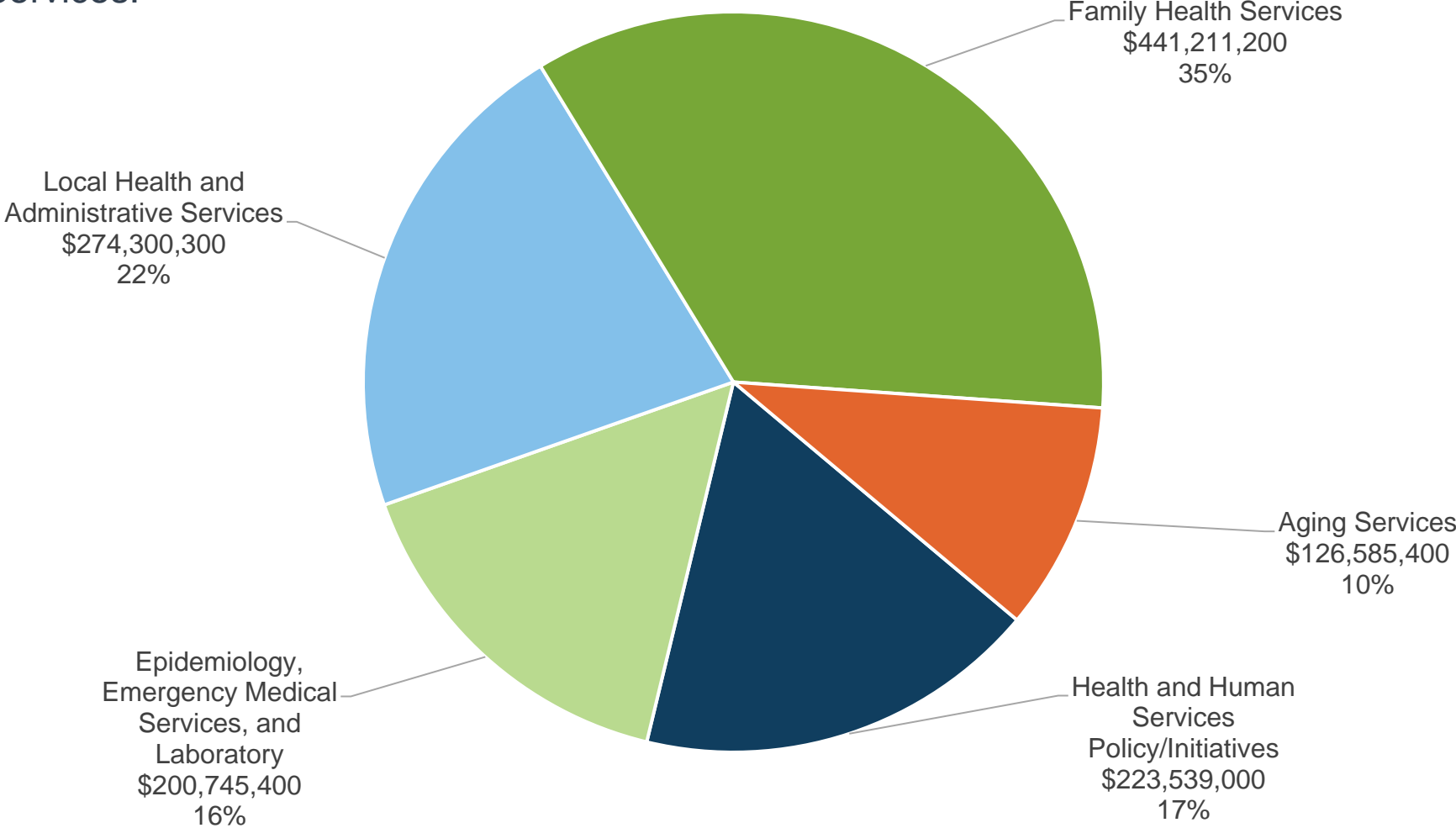
Local Health and Administrative Services- Funds infectious disease control and care, chronic disease prevention and health promotion, essential health services, local health services, and violence prevention

Family Health Services: 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

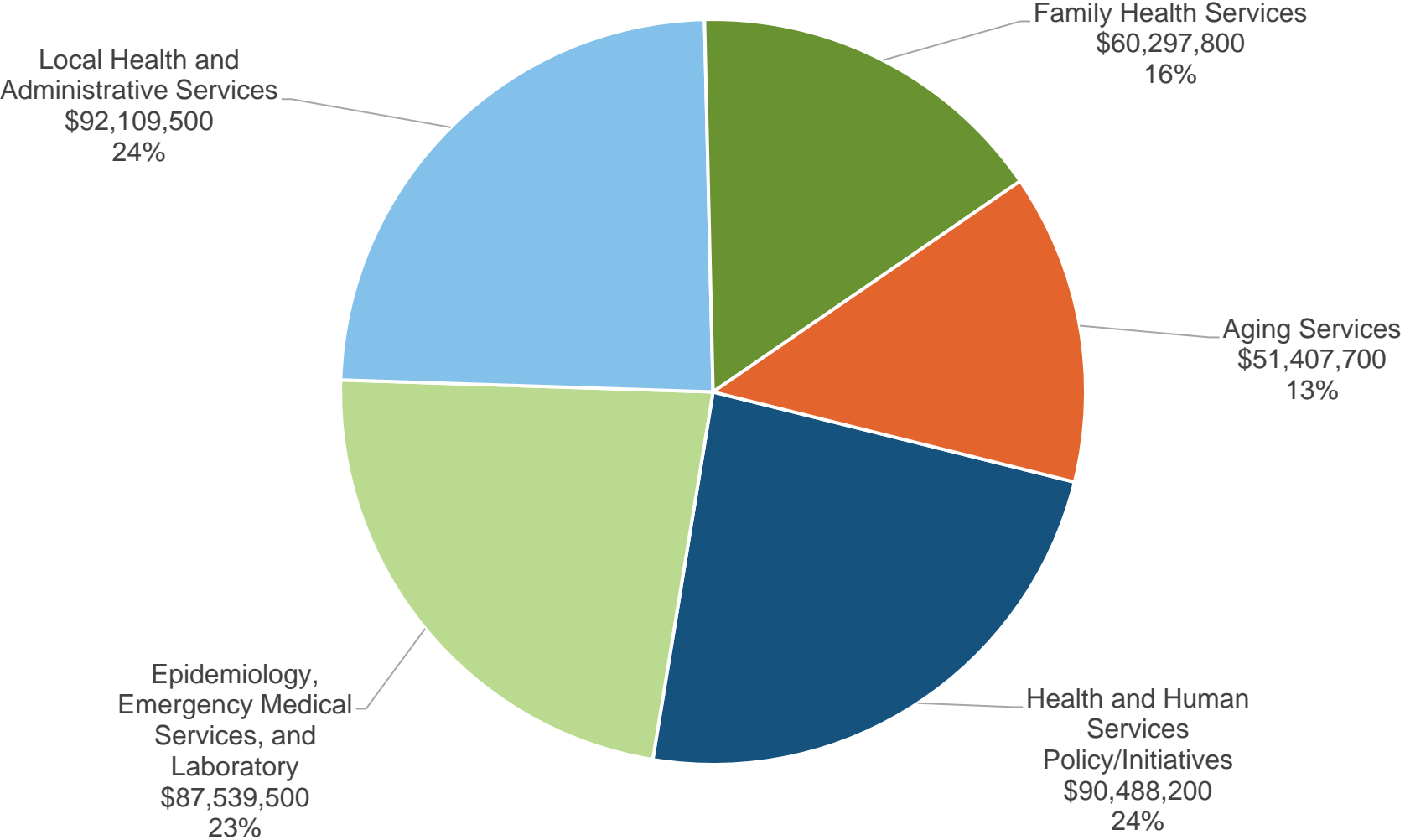
FY 2024-25 Gross Appropriations by Areas for Population Health and Aging Services

Of the **\$1.3 billion**, **35%** supports family health services which includes funding for the Women, Infants, and Children (WIC) Supplemental Food Program and **22%** supports local health and administrative services which funds Essential Local Public Health Services.



FY 2024-25 GF/GP Appropriations by Areas for Population Health and Aging Services

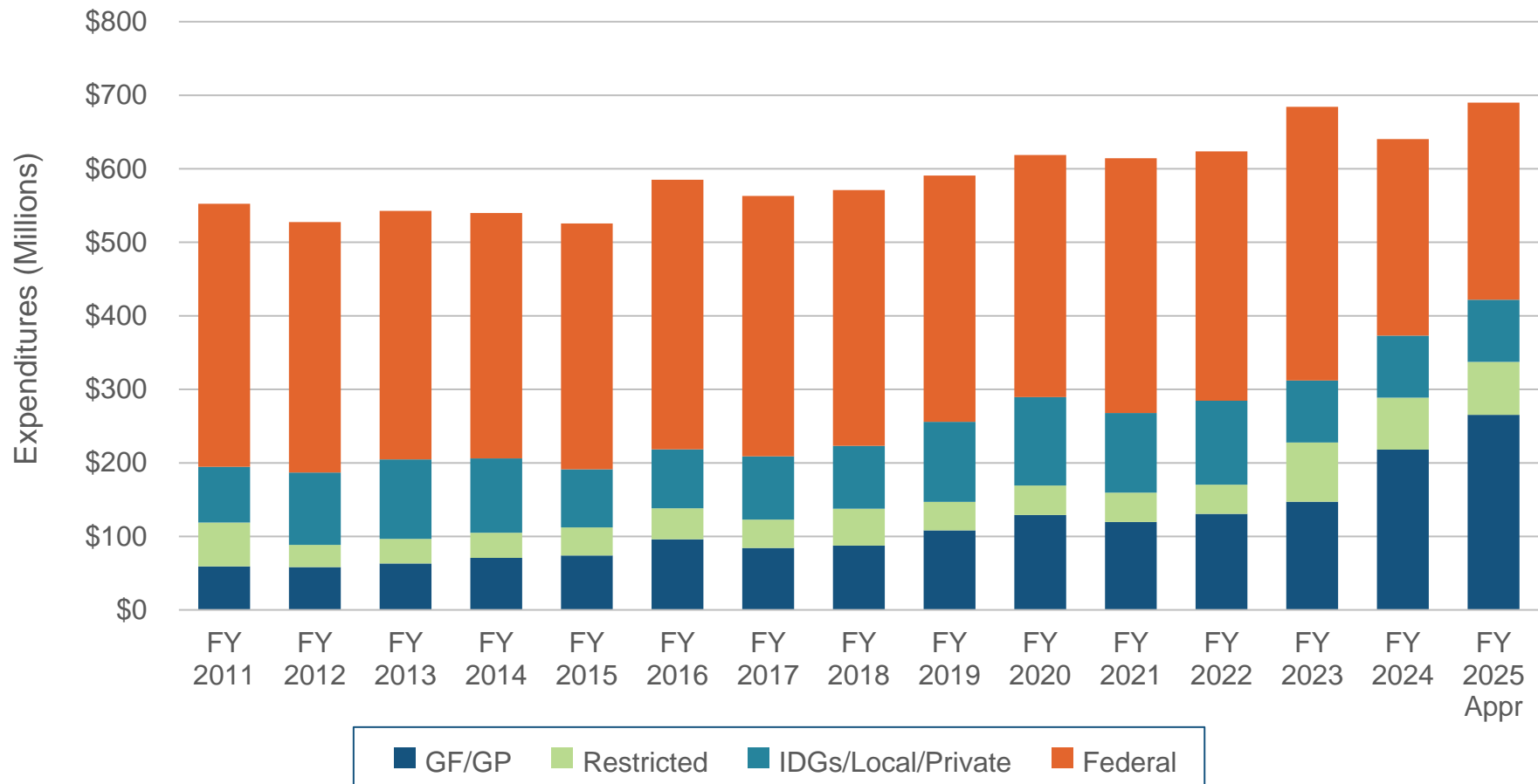
Of the **\$381.8 million** GF/GP, funding is more heavily concentrated in local health and administrative services due in part to the ongoing funding to the Healthy Homes program and bioterrorism preparedness services.



Major Budget Topics – COMMUNITY PUBLIC HEALTH

Spending History for Community Public Health

FY 2024-25 appropriations of **\$689.9 million** for community public health programming which includes nearly **\$35.0 million** in one-time funding. Note: Table does not include funding from Family Health Services unit.



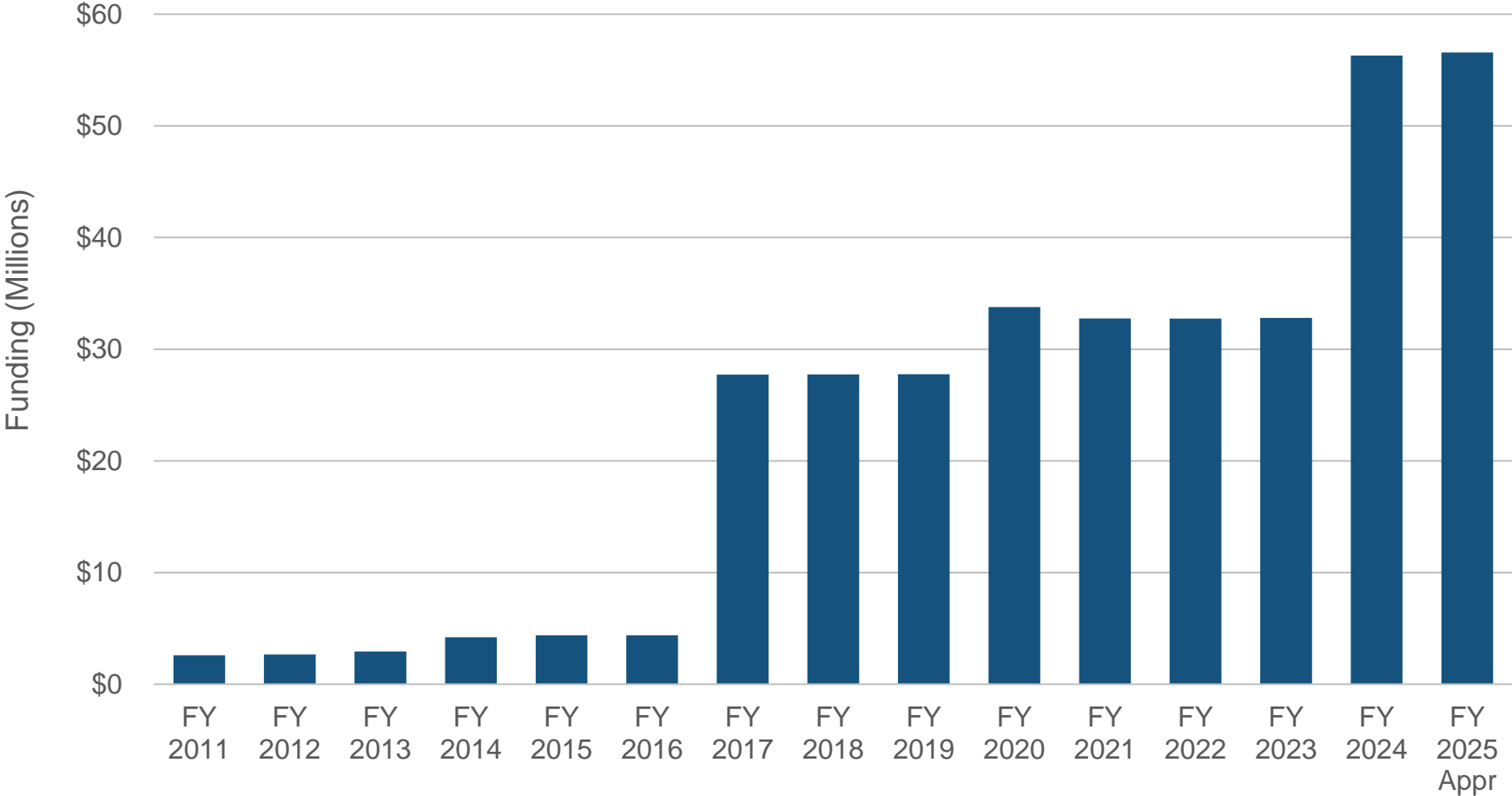
Note: Amounts shown for FY 2008-09 through FY 2010-11 include health regulatory and licensing functions, transferred to Department of Licensing and Regulatory Affairs in 2011.

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, including **366** housing units in FY 2023-24 at an average cost of **\$43,429** per unit.
- 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. Funding increased in FY 2023-24 was due to a **\$22.5 million** Healthy Homes expansion to support lead investigations, abatements, lab capacity, etc.

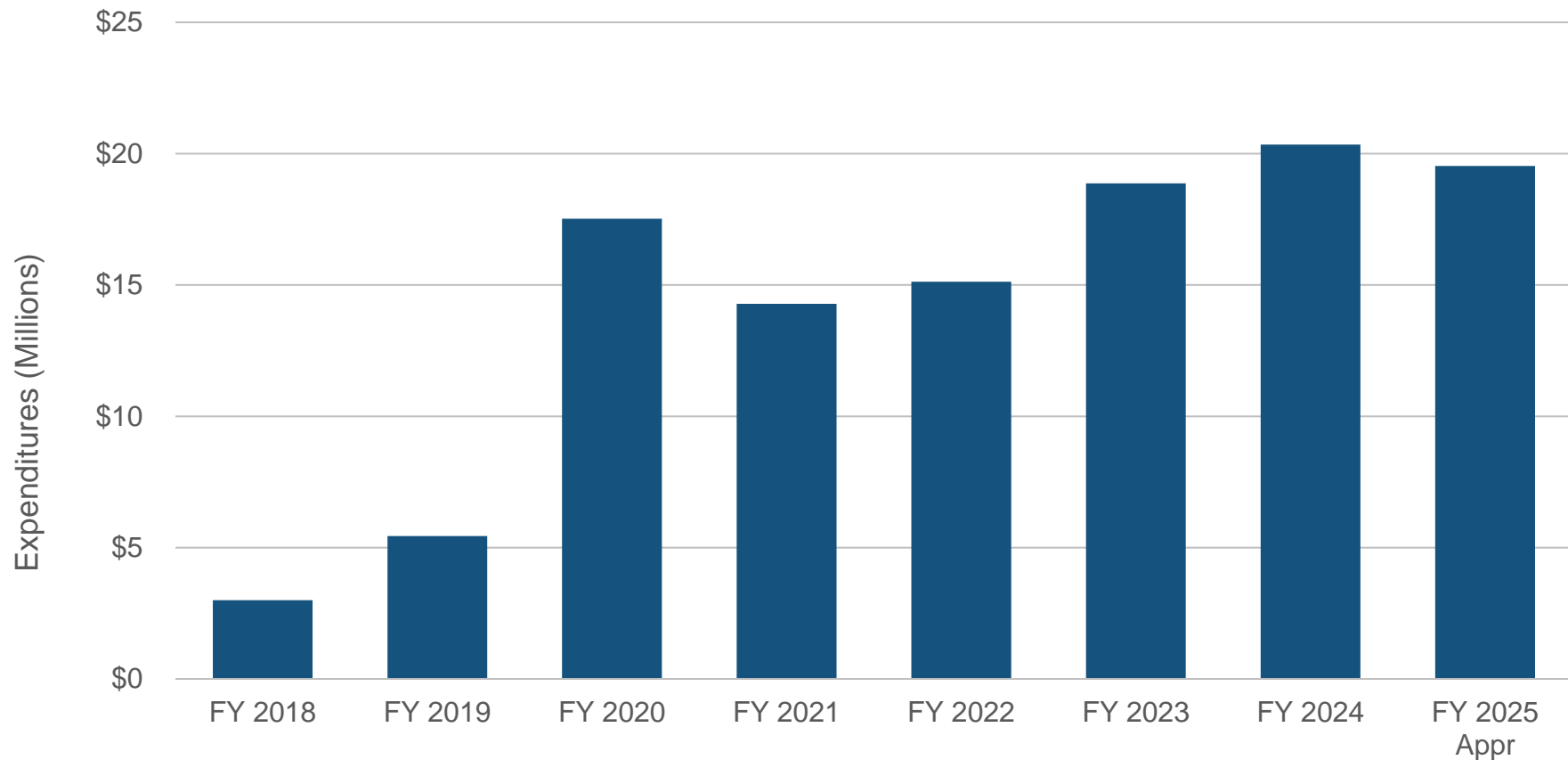


PFAS and Environmental Contamination Response

- 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 2023-24 were **96%** of the original **\$20.3 million** appropriation.

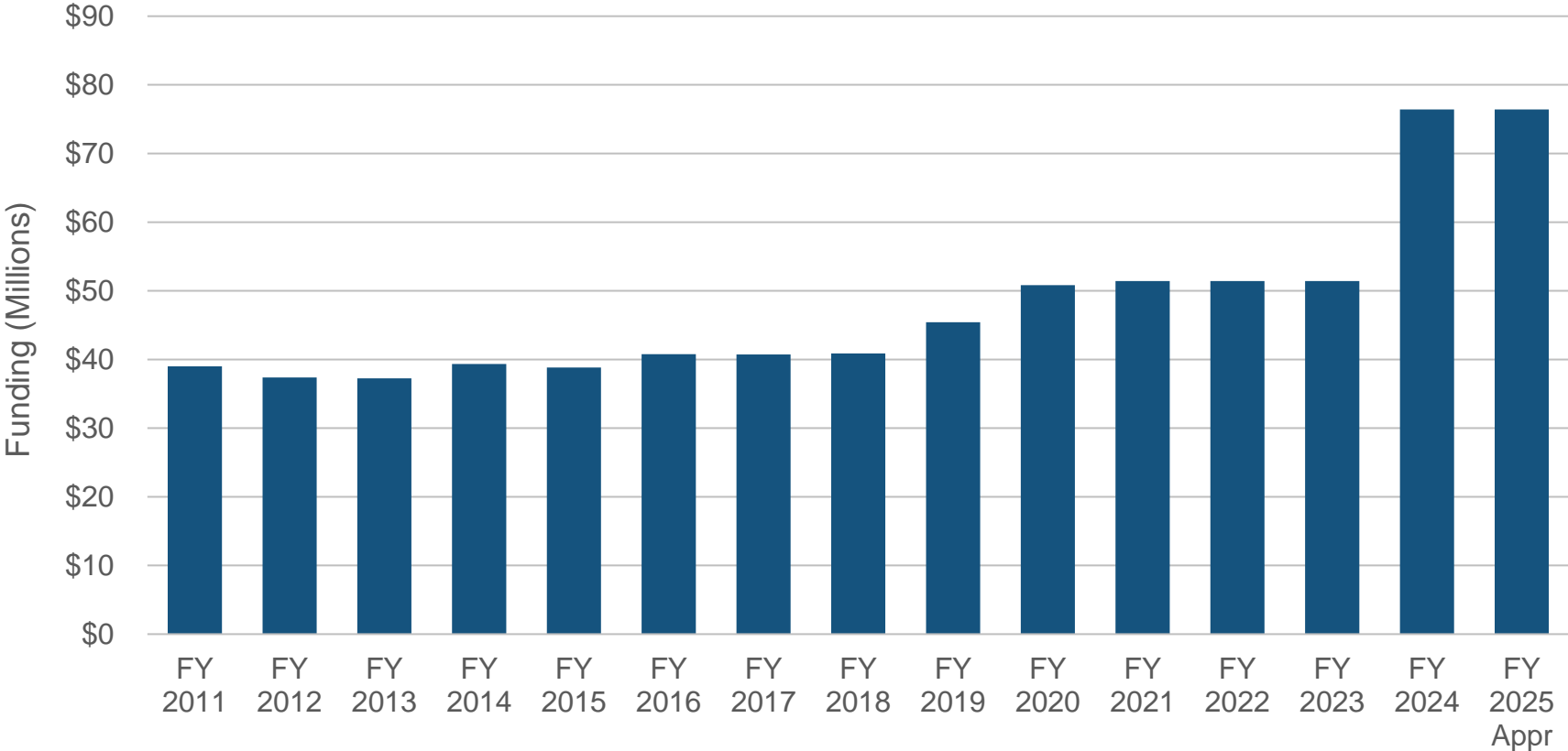


Essential Local Public Health Services

- Established in Part 24 of PA 368 of 1978, also known as the Public Health Code.
- Essential services that local health departments are required to provide to the public:
 - Immunizations
 - Infectious disease control
 - Sexually transmitted disease and HIV control and prevention
 - Hearing and vision screenings for children
 - Food protection (in cooperation with Dept. of Agriculture and Rural Development)
 - Public water and private groundwater supply as well as on-site sewage management (in cooperation with Dept. of Environment, Great Lakes, and Energy).
- Current funding distribution formula was created under Sec. 1234 of PA 207 of 2018 to reimburse local health departments for providing essential services.
- 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.

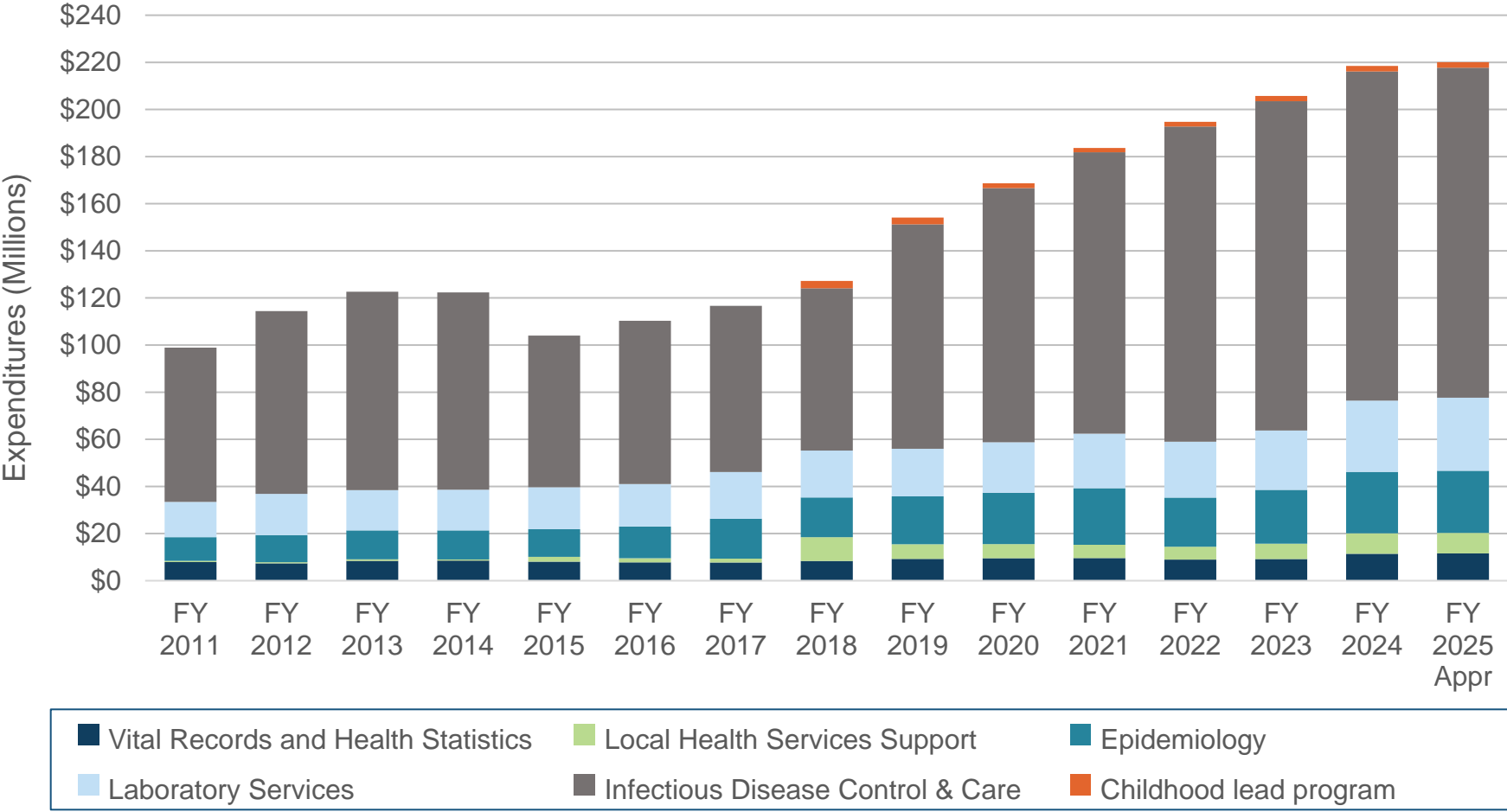
Funding History – Essential Local Public Health Services

Essential Local Public Health Services funding is distributed to local health departments to support required local public health services. A new distribution formula was implemented beginning FY 2019-20. Funding is **93% GF/GP**. FY 2023-24 funding included an increase to reach 50/50 cost share between the State and local health departments for services.



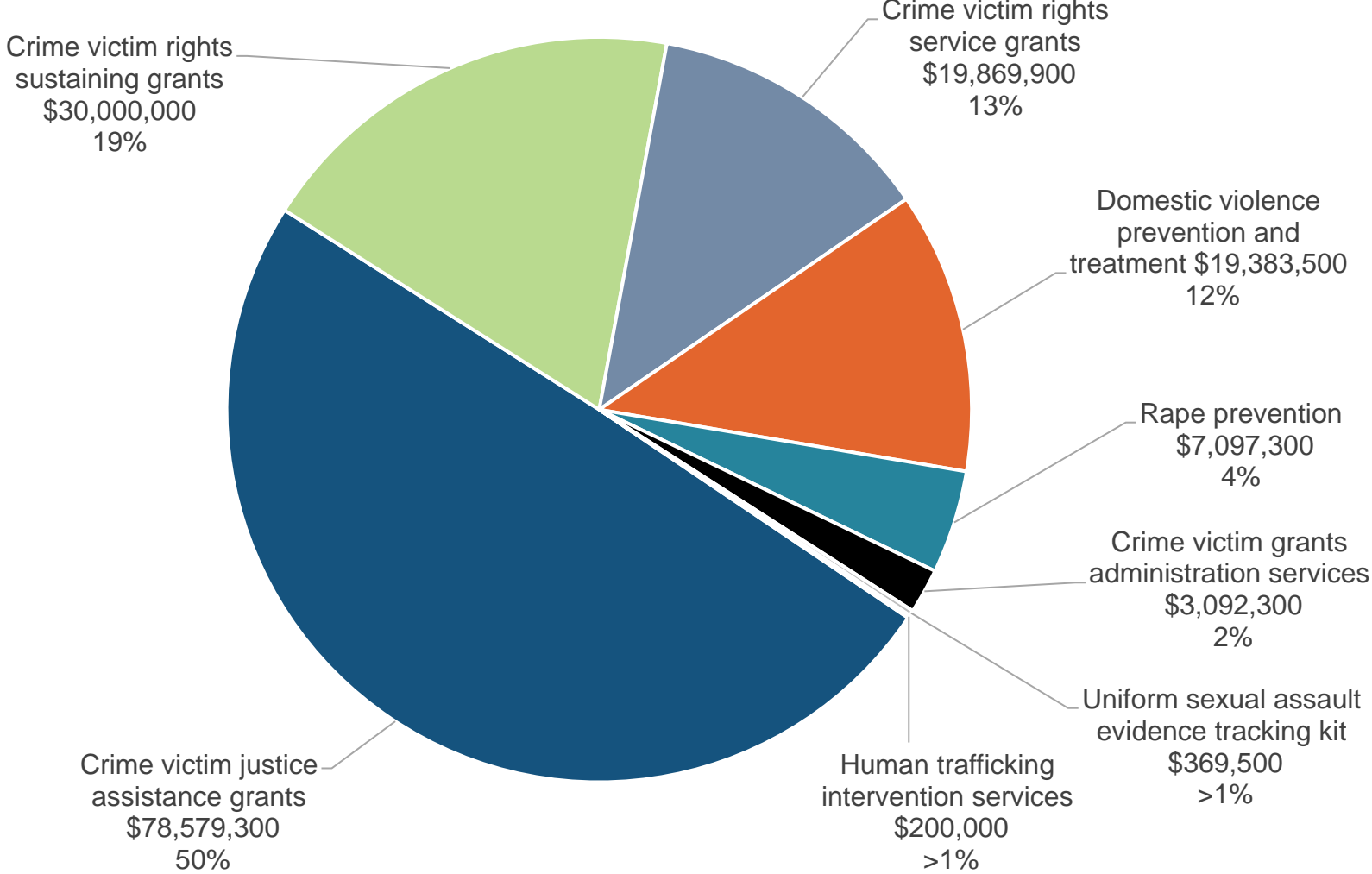
Spending History by Program Areas – Other Key Population Health Services

Funding for other key state and local population health functions has grown. The Childhood Lead program line was transferred from the Family, Maternal, and Child Health unit in FY 2017-18. For FY 2024-25, **\$217.7 million** is appropriated.



FY 2024-25 Appropriations for Crime Prevention Services

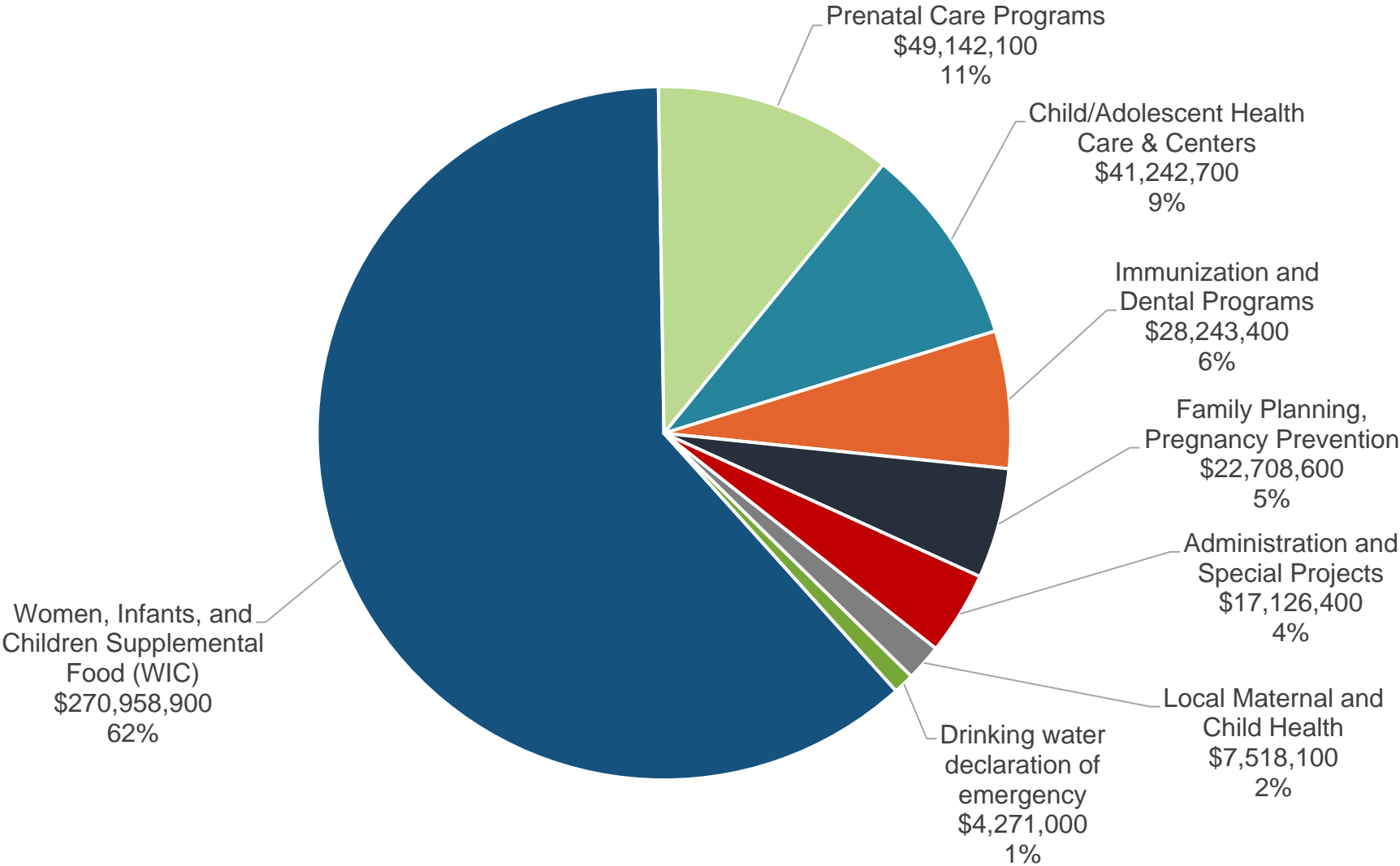
The DHHS population health budget includes **\$158.6 million** to support crime victim rights services, domestic violence services, rape prevention, and human trafficking programming. **63%** of funding is from federal revenues.



Major Budget Topics – FAMILY HEALTH SERVICES

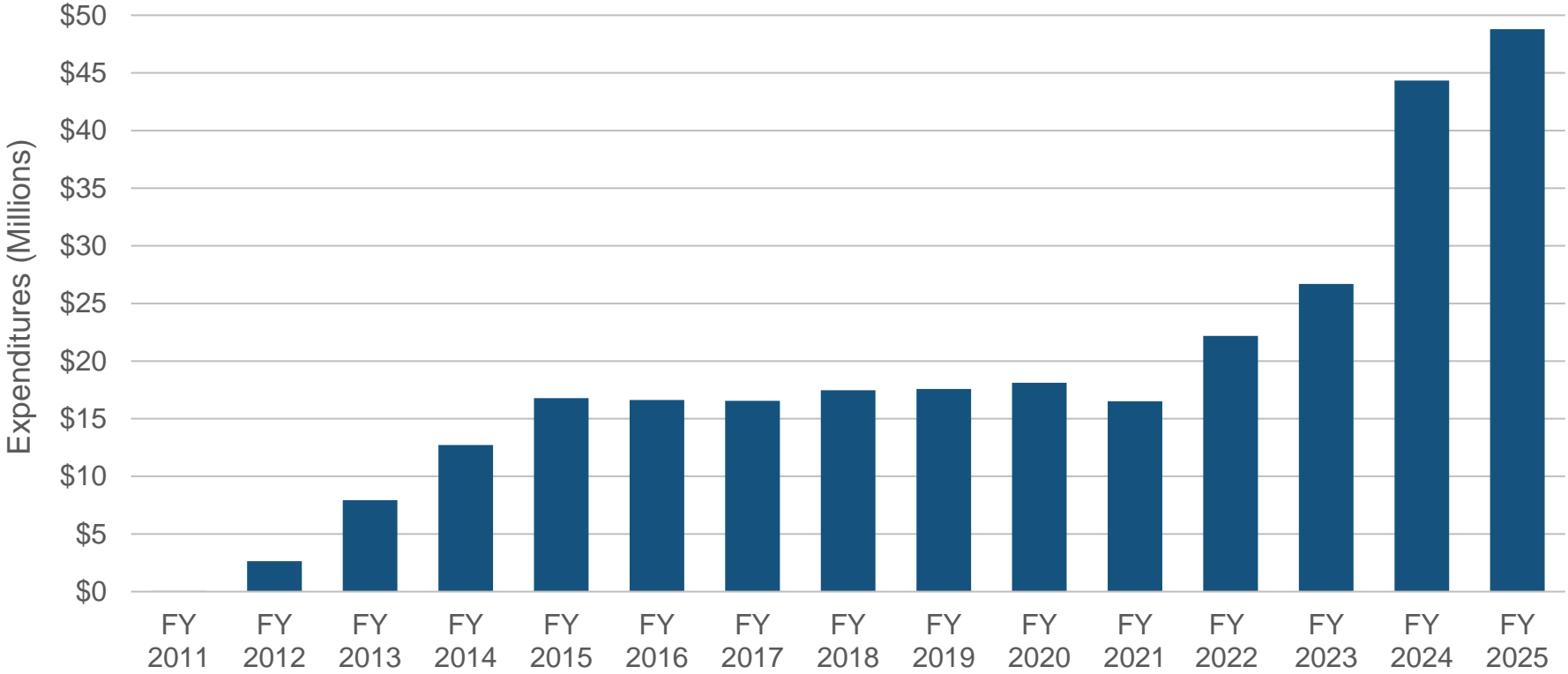
Overview By Program FY 2024-25 for Family Health Services

The DHHS population health budget includes **\$441.2 million** Gross (**\$60.3 million** GF/GP) for the following family, maternal, children’s public health services, and one-time funding.



Spending History - Prenatal Care and Outreach Support

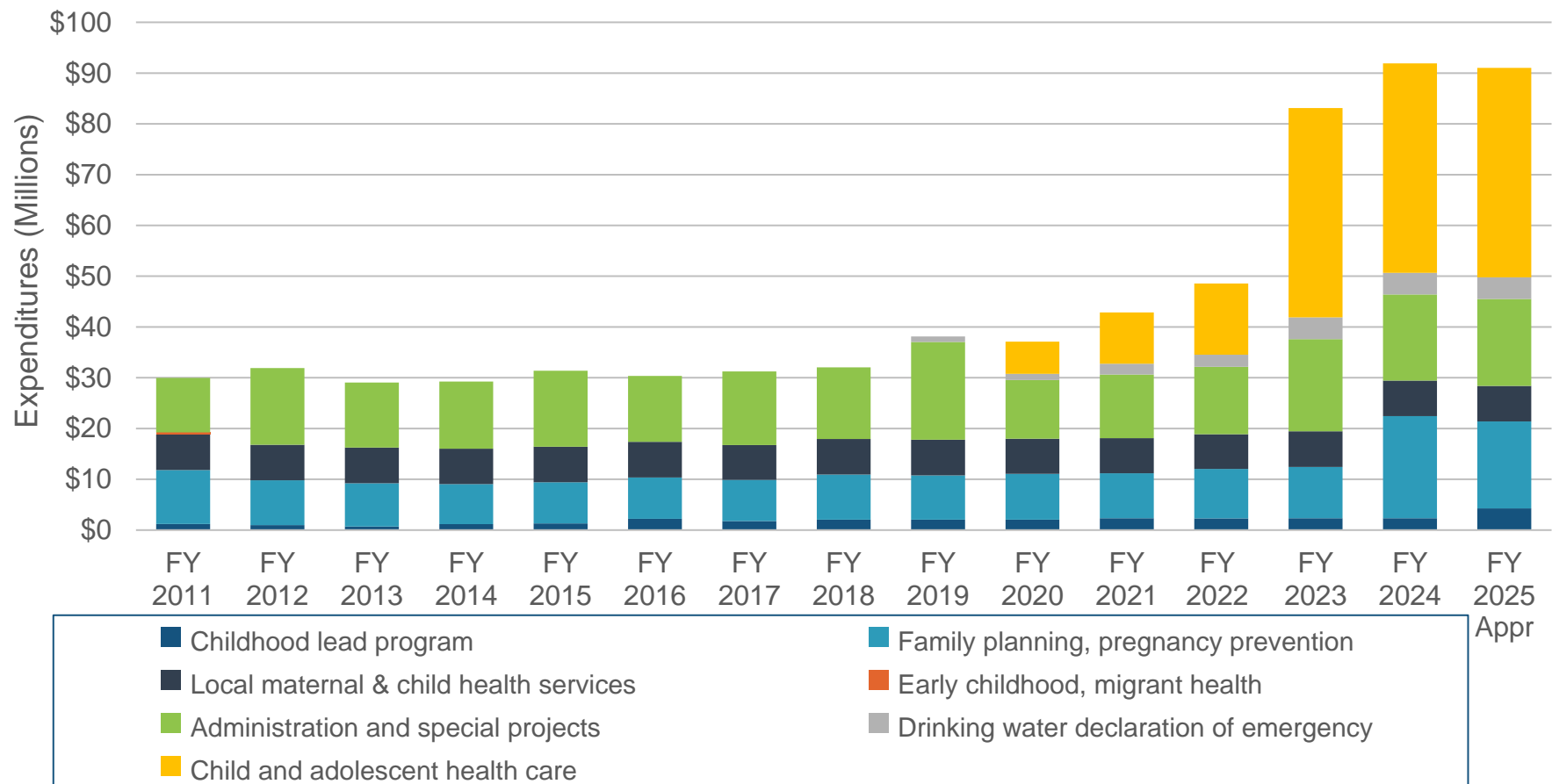
Prenatal Care and Outreach Support funding is used towards prenatal home-visiting programs to support pregnant women and teenagers through pregnancy, and for infant mortality reduction programs. Expenditures for FY 2023-24 were **77%** of the original **\$44.3 million** appropriation. For FY 2024-25, appropriations were increased to **\$48.8 million** due to the inclusion of one-time funding for Perinatal Quality Collaboratives and Nurse Family Partnership. Note: Work projects are not included in the expenditures below.



Note: The prenatal care and support program was vetoed in FY 2009-10. In FY 2010-11, only \$50,000 was appropriated for stillbirth education and a \$100 placeholder for Nurse Family Partnership.

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

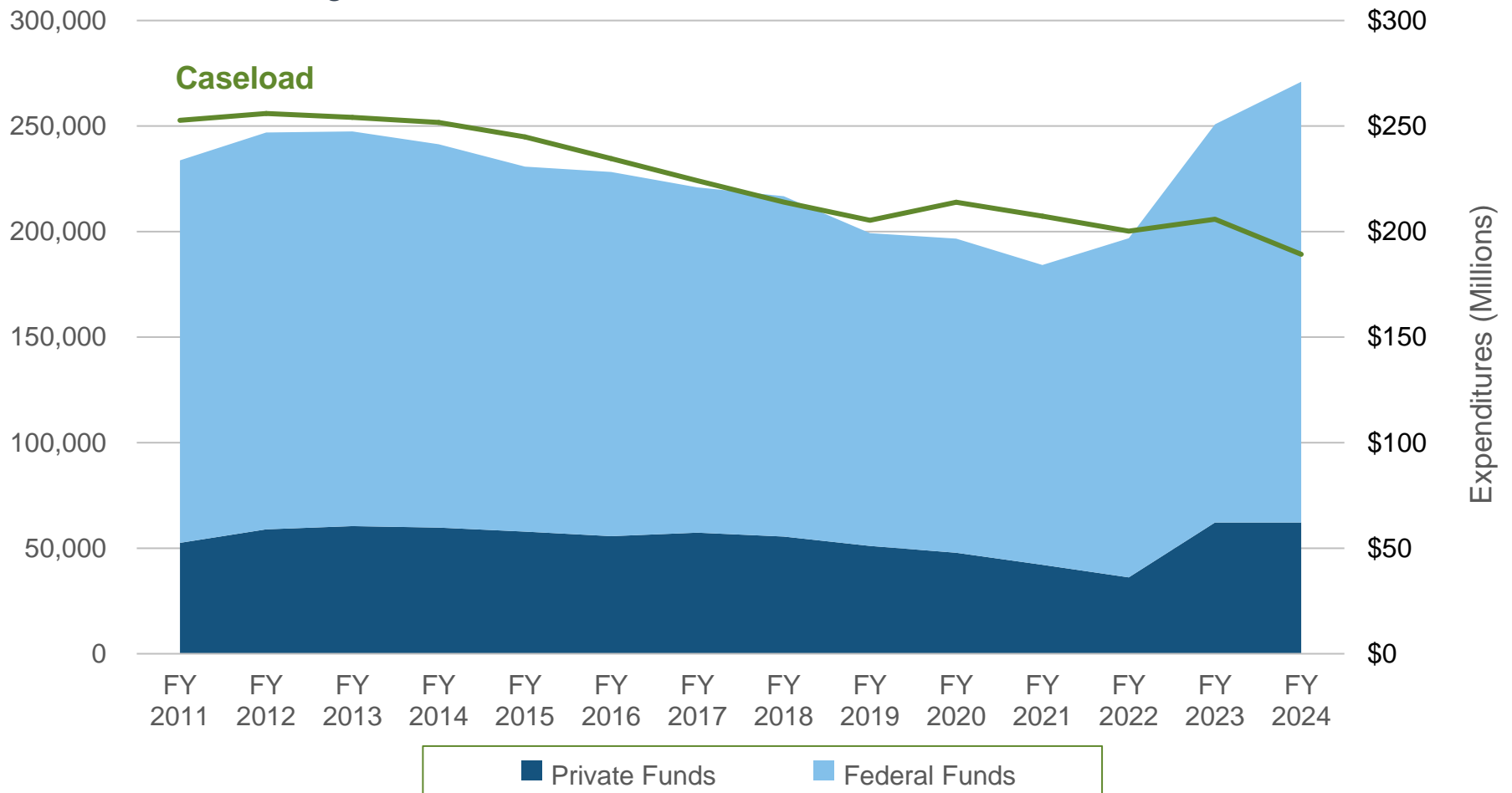
Further investment in new initiatives for child and adolescent health services and Healthy Moms Healthy Babies programming continues an upward funding trend for public health family, maternal, and children's health programs.



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 an overall pattern of decline, averaging **189,226** participants in FY 2023-24. Expenditures for federal funds and infant formula manufacturer rebates supporting supplemental food benefits for nutritionally at-risk mothers, infants, and small children were **84%** of the original **\$271.0 million** appropriation. Note: FY 2023-24 caseload numbers only reflect data from August to October 2024.

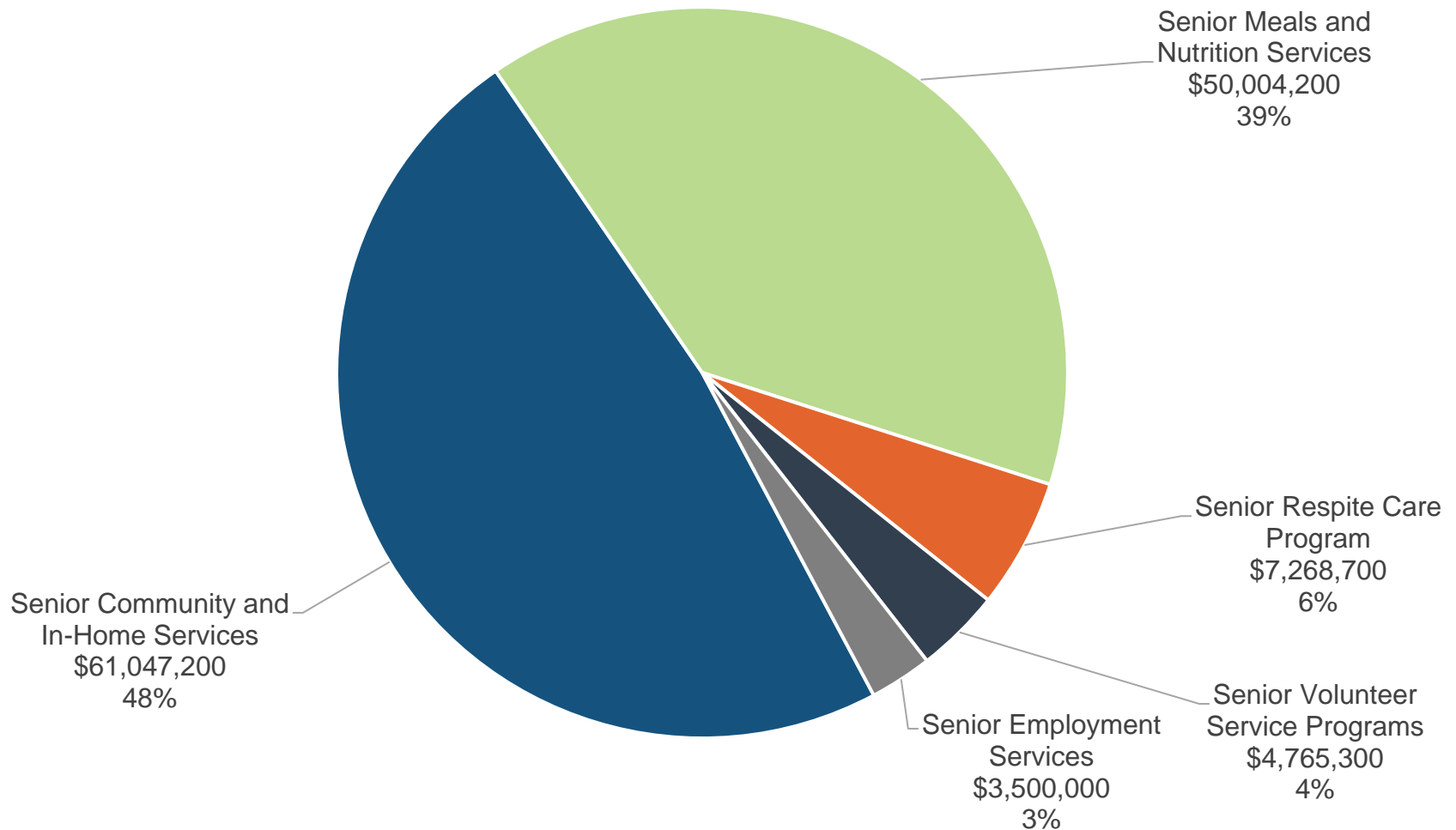


Major Budget Topics – AGING SERVICES

Overview By Program FY 2024-25

Aging Services

The DHHS budget includes **\$126.6 million** Gross (**\$51.4 million** GF/GP) for aging services, appropriated to the following program areas. FY 2022-23 removed aging and adult administration appropriation from the aging services budget.



Key Aging Services Programs

Senior Community and In-Home Services

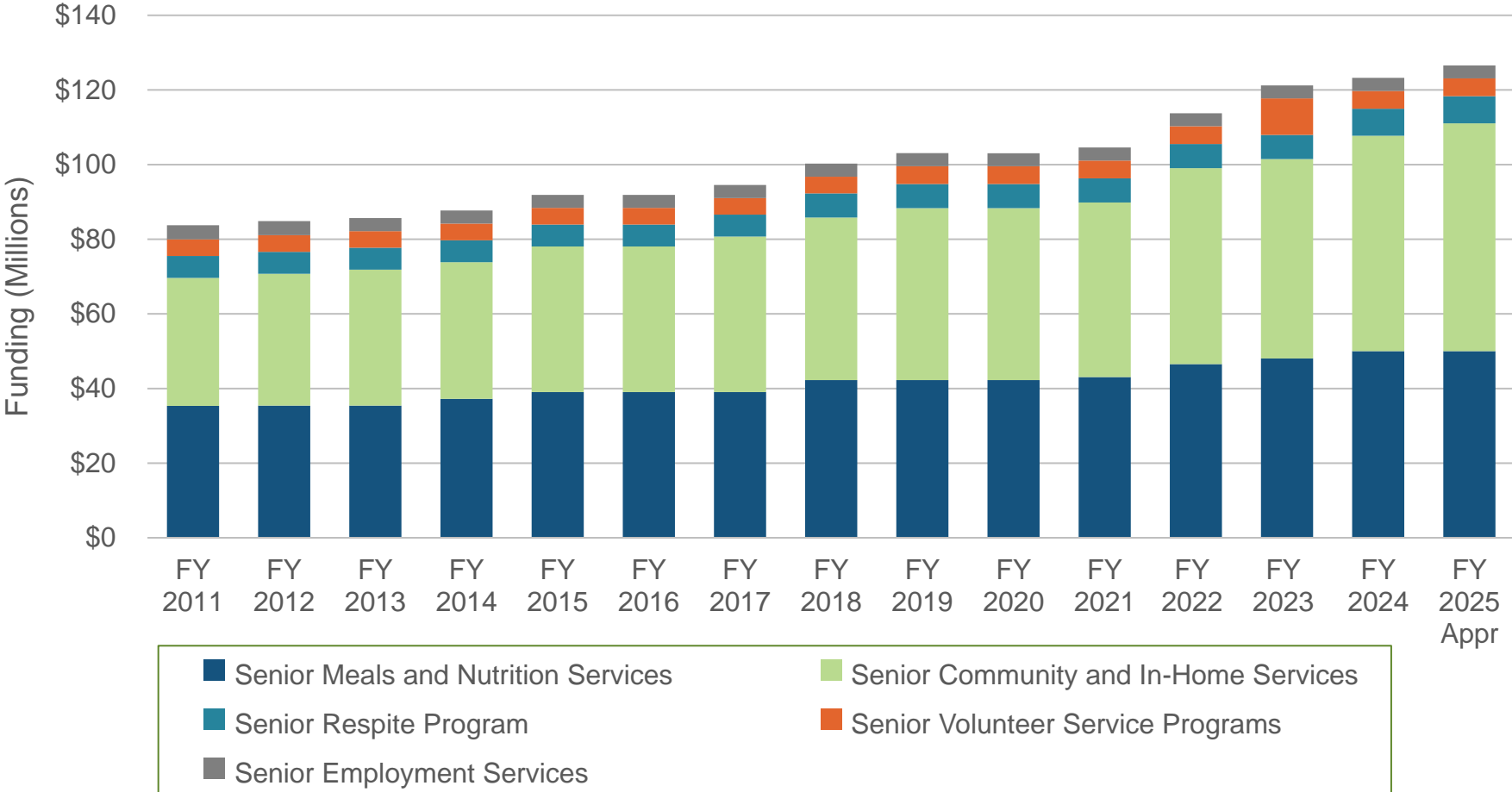
- Funds are used for services to facilitate senior independence. Services include elder abuse prevention and treatment training, preventative health services, family caregiver support program, counseling, legal assistance, and in-home assistance. The funding in FY 2021-22 assisted with:
 - Providing **137,652** elderly and caregivers with in-home services, nutrition, and caregiver programming
 - Providing **251,845** elderly and caregivers with community services

Senior Meals and Nutrition Services

- Provides seniors with at least one nutritional meal each day. The funding in FY 2021-22 assisted with:
 - **1.4 million** congregate meals provided to **34,539** elderly individuals
 - **8.7 million** home-delivered meals were delivered to **51,581** elderly individuals
 - Additionally, around **187,400** carry-out meals were served to elderly individuals during COVID-19 emergency when congregate meals were not available

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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