



ISSUE BRIEF

State Health Agency Finance

State health agencies serve a critical role in promoting and protecting health, and their financial resources are essential in supporting the many services and activities they provide to their citizens. The *ASTHO Profile of State Public Health, Volume Three*, provides the most current data on state health agency finance.

State Health Agency Revenue

The Profile Survey collected data on sources of state health agency revenue for fiscal years 2010 and 2011, including state general funds, other state funds, federal funds, fees and fines, and other sources.

In FY11, more than half of state health agency revenue was derived from federal funds. Slightly less than one-quarter was from state general funds.

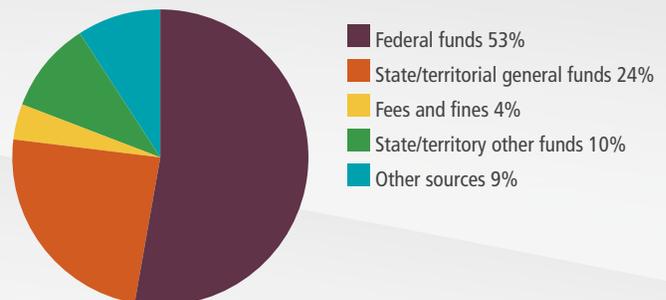
From FY10 to FY11 there were increases in total revenue for federal funds, state general funds, fees and fines, and other sources. Conversely, there was a decrease in total revenue from other state funds. Total revenue in state health agencies increased from approximately \$26.5 billion in FY10 to \$28.1 billion in FY11.

Federal Revenue at State Health Agencies

The third volume of the Profile Survey was the first to collect data about the sources of state health agencies' federal funds. From FY10 to FY11 there were increases in total federal revenue from the U.S. Department of Agriculture, Health Resources and Services Administration, Medicaid, Medicare, and Department of Homeland Security. There were decreases in total federal revenue from FY10 to FY11 from CDC, EPA, and federal indirect funds.

* Not all states provided values for all revenue sources or expenditure categories. Ns range from 35 to 49.

Percentage of State Health Agency Revenue by Funding Source for FY11*



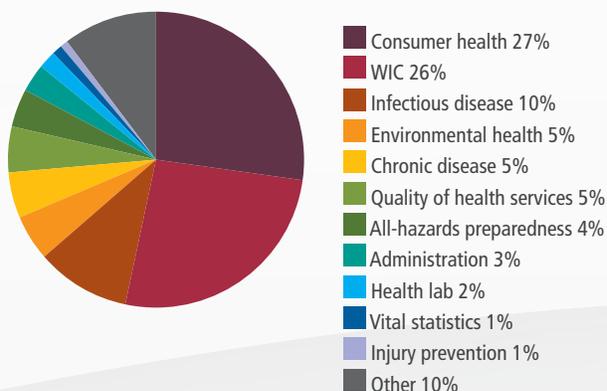
From FY10 to FY11 state health agencies saw increases in total federal revenue from the U.S. Department of Agriculture, Health Resources and Services Administration, Medicaid, Medicare, and Department of Homeland Security.

State Health Agency Expenditures

Given the breadth of activities performed by state health agencies, there are a variety of expenditure categories to which state health agencies can allocate funds. In fiscal year 2011, the two expenditure categories that comprised the greatest percentage of expenditures were consumer health, which includes clinical services, and WIC; both expenditure categories accounted for slightly more than one-quarter of state health agency expenditures.

From FY10 to FY11, there were increases in total expenditures for consumer health, WIC, infectious disease, environmental health, chronic disease, quality of health services, administrative services, health laboratory, injury prevention, health data, and other services. Conversely, there were decreases in total expenditures for all-hazards preparedness and vital statistics.

Percentage of State Health Agency Expenditures by Expense Category for FY11*



Additional Information

For additional information on state health agency finance, including per capita expenditures, data on state health agency awards, grants, and contracts, and regional differences in expenditures, as well as data on many more topics, please refer to the *ASTHO Profile of State Public Health, Volume Three*, available at www.astho.org/profile. The Profile is the only comprehensive source of information about state public health agency activities, structure, and resources. Launched in 2007 and fielded every two to three years, the Profile Survey aims to define the scope of state public health services, identify variations in practice among state health agencies, and contribute to the development of best practices in governmental public health.

Recommended citation: Association of State and Territorial Health Officials. *ASTHO Profile of State Public Health, Volume Three*. Washington, DC: Association of State and Territorial Health Officials. 2014.



* Not all states reported values for all expenditure categories or sources of revenue. Ns ranged from 40 to 49.