

State Public Health Finance

Results of the ASTHO 2010 Profile Survey

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Background

- Lack of comparable state fiscal data available prior to 2010
- Fiscal data collected via 2007 ASTHO Profile Survey were not comparable
 - Areas of authority vary widely from state to state
 - States define public health differently, therefore, different programs were included in the 2007 survey
- Unable to find comparable state public health data online
 - Searched state health agency websites

ASTHO's Approach to Collecting Comparable Fiscal Data

- Step 1: Convened state/territorial health agency chief fiscal officers
- Step 2: Drafted list of expenditures and revenues categories
- Step 3: Developed language to describe what to include and what to exclude
- Step 4: Pilot-tested fiscal module
- Step 5: Revised fiscal module

Survey Methods

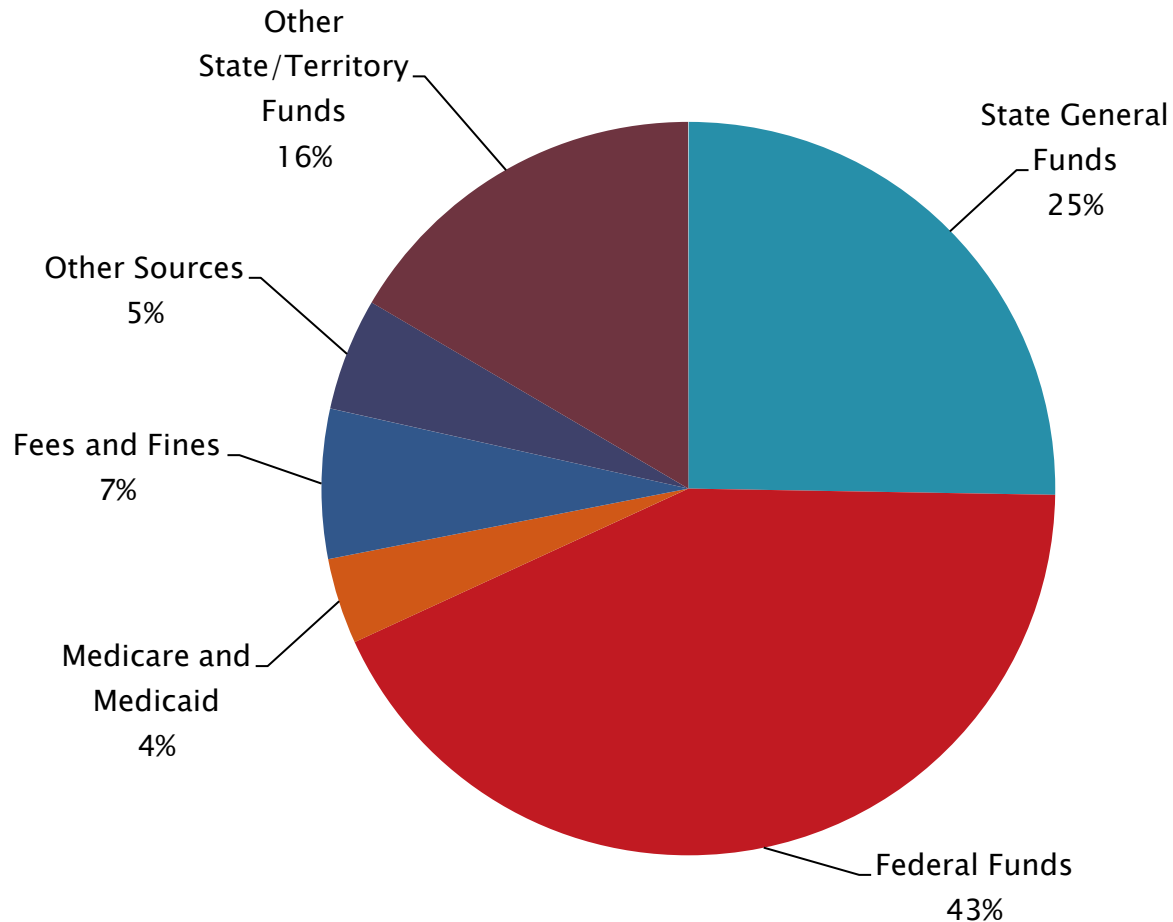
Instrument: Customized web-based survey (PCE)

Population surveyed: All 59 ASTHO member agencies (50 states, eight territories and the District of Columbia) between April and November 2010.

Response: 50 states, Washington DC and 2 territories submitted the survey; 46 states Washington DC and 2 territories completed the fiscal module. Territories excluded for this analysis.

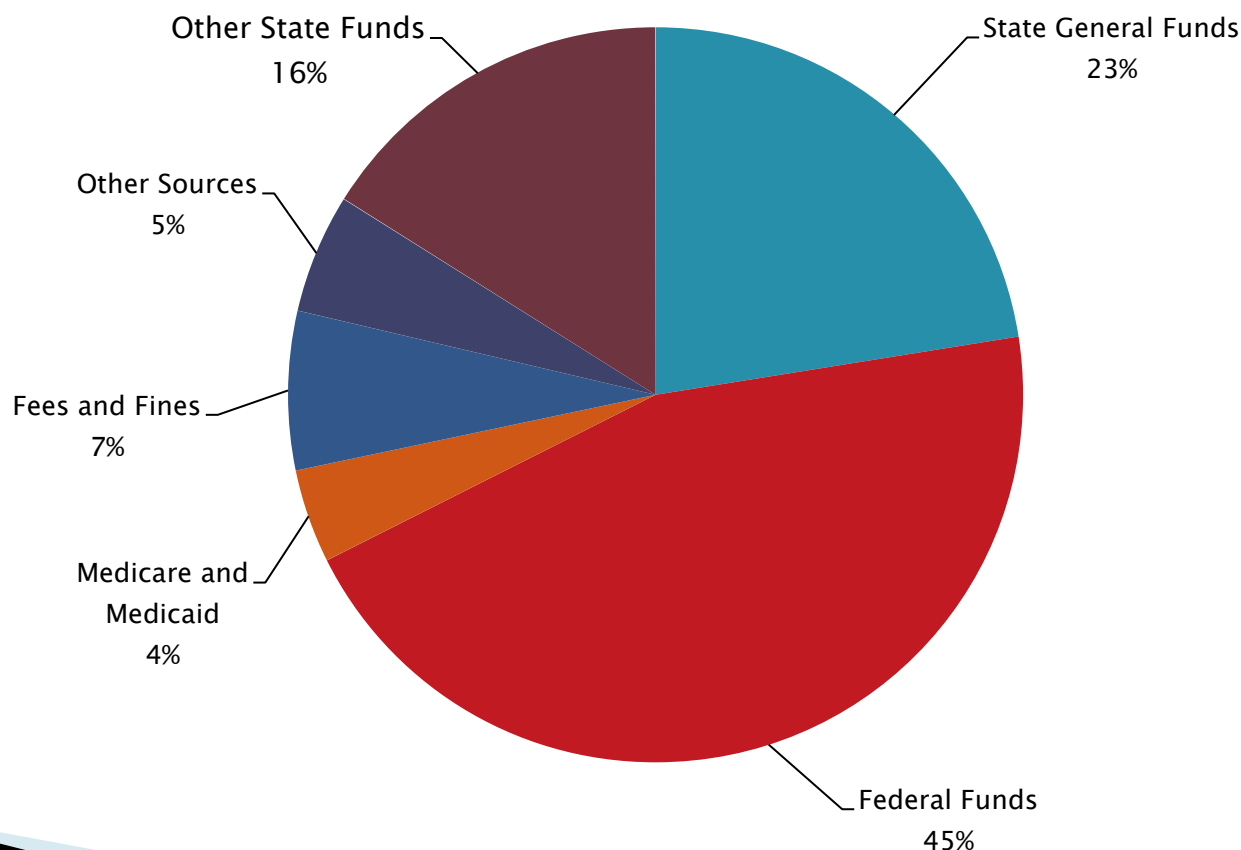
Results: State Public Health Funding

Percentage of SHA Revenue by Funding Source, FY2008



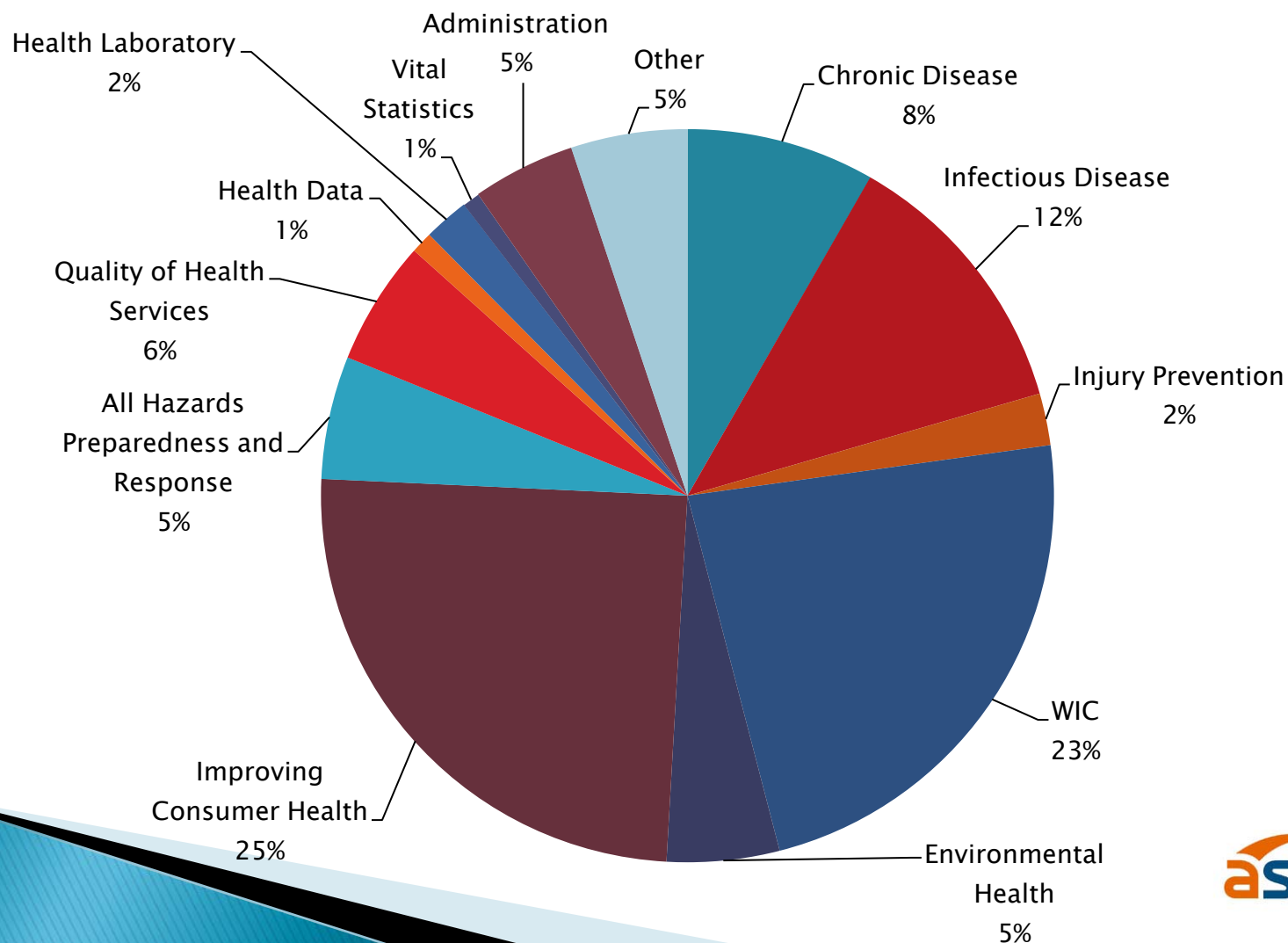
Results: State Public Health Funding

Percentage of SHA Revenue by Funding Source, FY2009



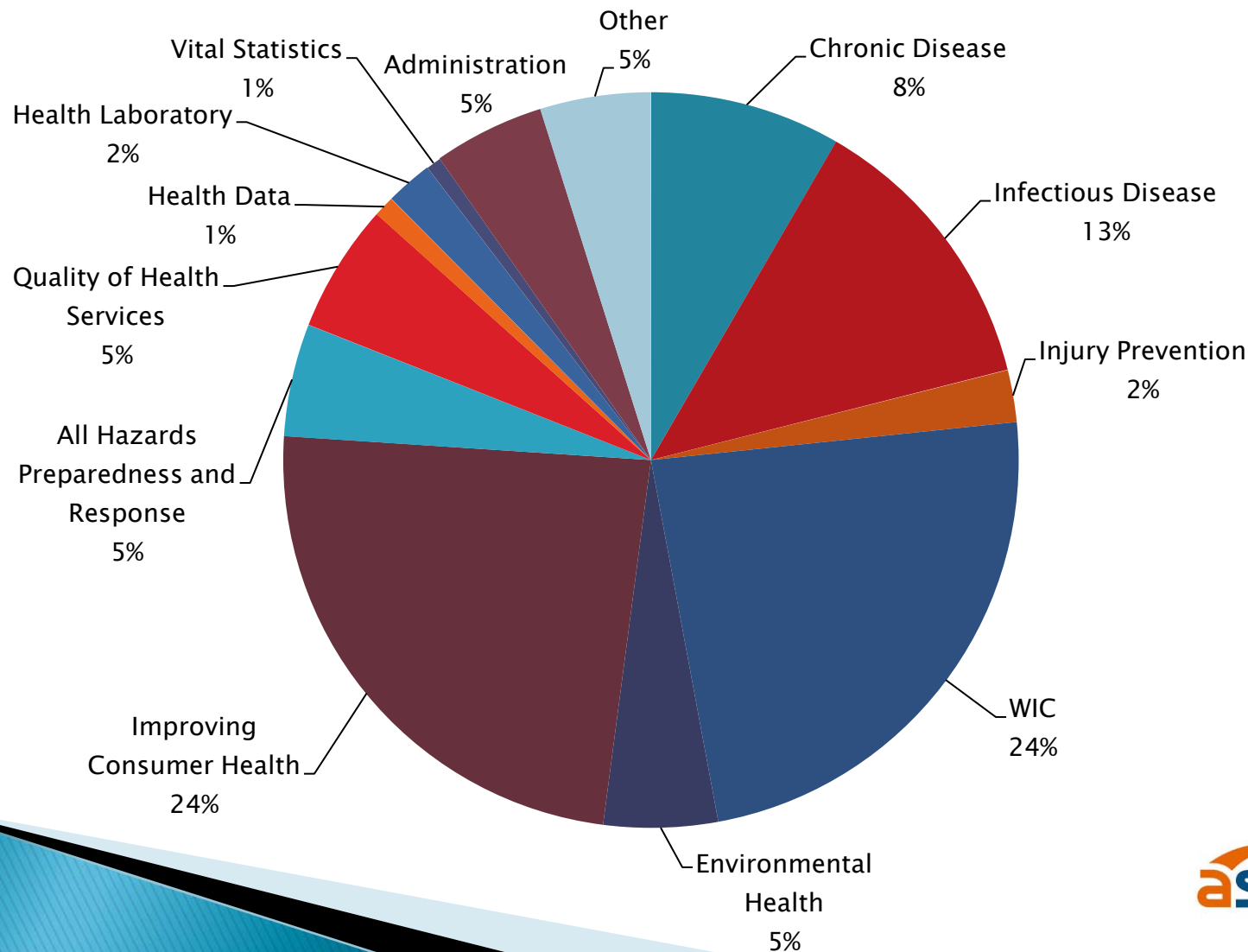
Results: State Public Health Expenditures

Percentage of SHA Expenditures by Category, FY 2008



Results: State Public Health Expenditures

Percentage of SHA Expenditures by Category, FY 2009



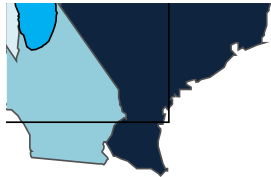
Results: Funding for Local Communities

- State health agencies receive approximately \$14 billion in federal funding annually
- Approximately 60% of federal funding for state health agencies directly supports the work of local health departments and community-based organizations.
- State health agencies:
 - Fund local health departments in the amount of \$5.3 billion
 - Send another \$2.5 billion into communities via grants for not-for-profit health organizations
 - Spend approximately \$450 million regional health departments

Results: Per capita expenditures, FY 2009

	Mean	Median
All State Health Agencies	\$95.30	\$76.16
Centralized governance	\$186.24	\$115.95
Decentralized governance	\$67.23	\$67.83
Free-standing, independent agency	\$107.65	\$84.25
Under an umbrella agency	\$80.00	\$74.38

Results: Per capita expenditures, FY 2009



Limitations

1. Missing fiscal data for four states
2. Caveats to fiscal data reported
 - a) Different fiscal year
 - b) Difficulties reporting within expenditure categories
3. Carry forward dollars were not reported in revenues for at least one state
4. Unclear which respondents reported federal pass through dollars as awards to locals
5. Preliminary data

Question 1

- ▶ Medicaid and Medicare
 - How can we make this language more clear?
 - Are there more examples of “small CMS”?
 - What should we say about waivers?

Question 2

- ▶ Carryforward funds
 - What should we instruct states to do with carryforward?
 - Should this be a question that is separate from the revenue question? Or should it be just another piece of the revenue pie?
 - What language can we use to make this clear?

Question 3

▶ Awards to locals

- We want to capture all of the funds that go from states to locals.
- Is the current wording of this question clear?
- Can we break it out further into federal pass-through funds and other funds that go to locals?
- We also want to capture money that goes from states into local communities. Does the current wording (\$ to locals and \$ to non-profits) capture this?

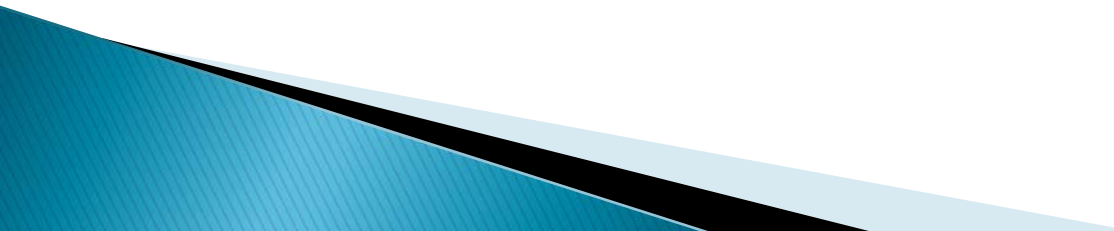
Question 4

- Revenue Categories
 - Would it be possible to break this down further?
 - We are specifically interested in which parts of the federal government the federal funds come from.
 - CDC
 - MCHB/HRSA
 - PHEP
 - Etc.
 - Should we have a special category for federal pass-through funds to locals?

Question 5

- ▶ Expenditure Categories
 - What was unclear?
 - What else should be spelled out?
 - What seems to be in the wrong place?
 - Could you break this down further?

Additional Questions

- ▶ What additional analyses would you like to see?
 - ▶ What was the trickiest or most unclear part of this for your state?
 - ▶ What other suggestions do you have for improvement to this section of the survey?
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For more information

www.astho.org/Research/Data-and-Analysis/

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