MONTANA

Agency Mission
To improve and protect the health of Montanans by creating conditions for healthy living.

Top Five Priorities
1. Tobacco prevention and cessation
2. Childhood and adolescent immunizations
3. Colorectal cancer screening
4. Injury prevention
5. Access to chronic disease prevention programs

Structure and Relationship with Local Health Departments
The state/territorial health agency is under a larger agency—sometimes referred to as a “superagency” or “umbrella agency”—and has a decentralized relationship with local health departments.

- **Independent local health agencies**
  (led by staff employed by local government)
  58

- **State-run local health agencies**
  (led by staff employed by state government)
  0

- **Independent regional or district offices**
  (led by non-state employees)
  0

- **State-run regional or district offices**
  (led by state employees)
  0

Organizational Structure
The health official does not report directly to the governor. The state does not have a board of health.

Planning and Accreditation
The state/territorial health agency has developed the following within the past five years:

- Health Assessment
- Health Improvement Plan
- Strategic Plan

The state/territorial agency has submitted an application for accreditation.

Agency Workforce
The state/territorial health agency has 195 FTEs. There are no state/territorial health agency workers assigned to local/regional offices.

Agency Finance (FY15*)

Source of Funding

Federal Funding Sources

CDC 38.9%
Other State Funds 18.5%
Federal Funds 67.8%
Fees and Fines 7.2%
Other Sources 0.6%

*FY15 was defined as 7/1/2014 – 6/30/2015.