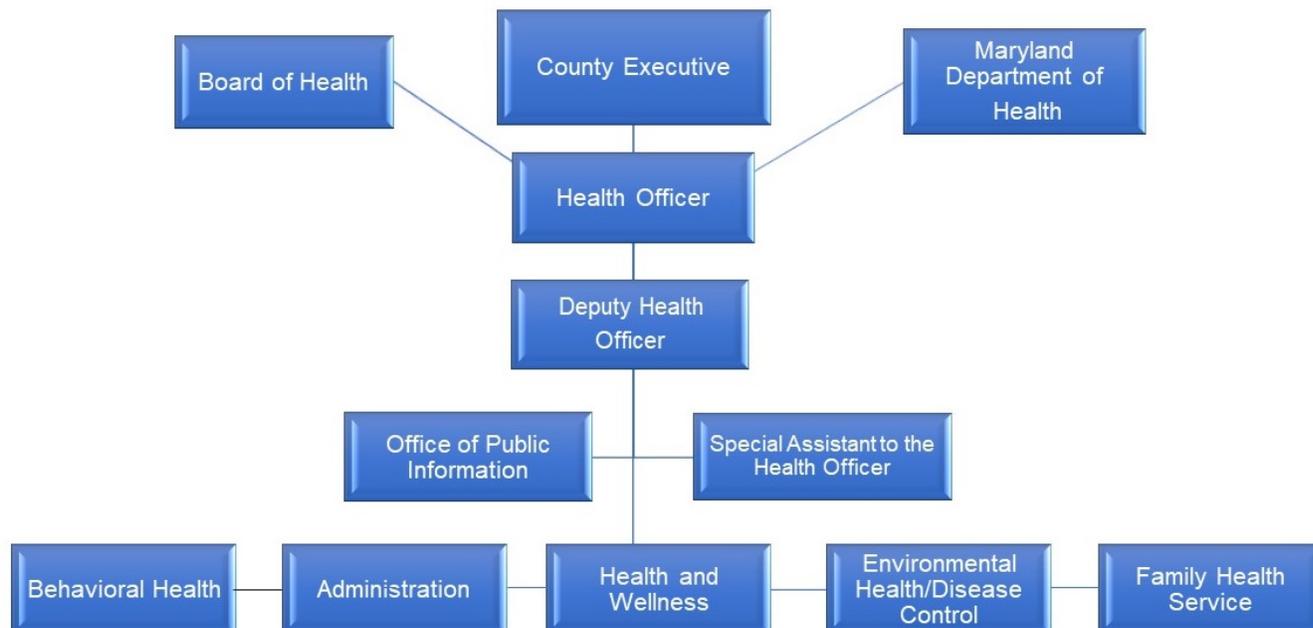


Health Department



MISSION AND SERVICES

The Health Department (PGCHD) protects the public’s health; assures availability of and access to quality health care services; and promotes individual and community responsibility for the prevention of disease, injury, and disability.

CORE SERVICES

- Maternal and child health services, family planning, and sexually transmitted infection treatment and testing
- Assuring access to behavioral health services, resources and education, and preventing Opioid Use Disorder
- Chronic disease and health promotion interventions
- Assuring access to resources addressing health and social needs including care coordination services
- Communicable disease investigation, outbreak prevention, and emergency preparedness activities
- Environmental health promotion and protection

FY 2026 KEY ACCOMPLISHMENTS

- Developed a new five-year Strategic Plan and published the 2025 Community Health Assessment, identifying priority areas including chronic disease, maternal and infant health, behavioral health, access to care, and social determinants of health in collaboration with staff, partners, and community stakeholders.
- Collected over \$70,000,000 in accounts receivable within a single fiscal year, successfully eliminating a multi-year backlog.

- Expanded opioid prevention and response efforts by launching five new municipal and law enforcement Opioid Response Programs and providing Naloxone training to more than 2,250 individuals (FY 2025/FY 2026), contributing to five reported lives saved through community administration.
- Led Countywide drug take-back initiatives by collecting unwanted prescription medications and training a community partner to independently host future Drug Take Back Days.
- Enhanced behavioral health crisis response services by serving tens of thousands of individuals through the 988 Regional Call Center and delivering in-person mobile crisis support.

STRATEGIC FOCUS AND INITIATIVES FOR FY 2027

The agency's top priorities in FY 2027 are:

- Convening diverse sectors around shared health goals, leveraging a comprehensive partnership strategy, Health in All Policies framework, and integrated Community Health Assessment and Improvement Plan.
- Pursuing Public Health Accreditation Board accreditation while diversifying funding sources, modernizing technology systems, strengthening the workforce, and implementing quality improvement processes.
- Clarifying core values, developing leadership capacity at all levels, implementing comprehensive performance management, and aligning budgets and grant applications with strategic goals.
- Enhancing visibility through strategic communications and expanded outreach.

FY 2027 BUDGET SUMMARY

The FY 2027 proposed budget for the Health Department is \$89,909,000, a decrease of -\$22,264,600 or -19.8% under the FY 2026 approved budget.

Expenditures by Fund Type

Fund Types	FY 2025 Actual		FY 2026 Budget		FY 2026 Estimate		FY 2027 Proposed	
	Amount	% Total	Amount	% Total	Amount	% Total	Amount	% Total
General Fund	\$41,346,500	47.2%	\$35,388,200	31.5%	\$36,613,100	40.2%	\$37,853,100	42.1%
Grant Funds	46,169,147	52.8%	64,696,000	57.7%	54,294,000	59.6%	48,478,400	53.9%
Special Revenue Funds	—	0.0%	12,089,400	10.8%	253,200	0.3%	3,577,500	4.0%
Total	\$87,515,647	100.0%	\$112,173,600	100.0%	\$91,160,300	100.0%	\$89,909,000	100.0%

GENERAL FUND

The FY 2027 proposed General Fund budget for the Health Department is \$37,853,100, an increase of \$2,464,900 or 7.0% over the FY 2026 approved budget.

Reconciliation from Prior Year

	Expenditures
FY 2026 Approved Budget	\$35,388,200
Increase Cost: Compensation - Mandated Salary Requirements — Increase in the annualization in FY 2026 and planned FY 2027 salary adjustments offset by an increase in salary lapse and decrease of three positions transferring to grant programs	\$1,032,100
Increase Cost: Fringe Benefits — Increase in the fringe benefit rate from 34.2% to 35.3%, an increase in new positions, and alignment of County contribution for the Substance Abuse Treatment Outcomes Partnership (STOP) grant program cash match requirement	844,700

Reconciliation from Prior Year *(continued)*

	Expenditures
Add: Compensation - New Positions — Funding is provided for two new positions including a Community Developer 4A and Nutritionist 1A to support the Food as Medicine Program, six full time positions are realigned from grant programs including an Administrative Aide 1A, a Budget Management Analyst 2A, and Community Developer 1A to support the Health Assures program, a Community Health Nurse 1A to support the Title V program, a Nurse Practitioner 1A to support the Clinical Care program, and a Community Developer 1A to support the Black Women's Maternal Health program; funding is also provided for a FY 2026 adjustment for a Community Health Nurse	686,000
Increase Cost: Recoveries — Decrease in recoveries from grant programs	546,000
Increase Cost: Technology Cost Allocation — Increase in OIT charges based on anticipated countywide costs for technology	202,100
Increase Cost: Operating — Increase in training, office operating equipment, equipment leases, interagency legal assistance fees, and vehicle maintenance costs	130,400
Increase Cost: Operating — Increase in operating contracts primarily to support water treatment, custodial, and armored truck services	124,200
Add: Operating — Funding for operating contract supporting the Food as Medicine program which supports community agriculture	100,000
Increase Cost: Compensation — Adjustment in staffing complement for a part time Community Health Nurse 4A converted to full time, the reallocation of an Administrative Aide 4A to an Information Technology Project Coordinator, and the County contribution to the STOP grant program	91,000
Decrease Cost: Compensation — Decrease in State Special Pay offset by an increase in overtime	(70,500)
Decrease Cost: Operating — Decrease in telephone charges based on transferring services to Microsoft Teams, postage, travel non-training, mileage, and the County contribution to the STOP grant program	(202,100)
Decrease Cost: Operating — Decrease in utilities, operating equipment maintenance, gas and oil, office building rental, other office automation software offset by an increase to support an enterprise permitting and licensing system	(310,800)
Decrease Cost: Operating — Net decrease in general and administrative contracts for temporary staff and costs realigned to compensation and fringe benefits for the Black Women's Maternal Health program offset by an increase in strategic planning and grant writing services	(708,200)
FY 2027 Proposed Budget	\$37,853,100

GRANT FUNDS

The FY 2027 proposed grant budget for the Health Department is \$48,478,400, a decrease of -\$16,217,600 or -25.1% under the FY 2026 approved budget. Major sources of funds in the FY 2027 proposed budget include:

- 988 State Crisis System Funding
- AIDS Case Management
- Childhood Lead Poisoning Prevention
- General Fund Services
- General Medical Assistance Transportation

Reconciliation from Prior Year

	Expenditures
FY 2026 Approved Budget	\$64,696,000
Enhance: Existing Program/Service — Ending the Epidemic Health Resources and Services Administration (HRSA), Immunization Action Grant, Oral Disease Injury Prevention and Reproductive Health, Federal SUD Services Grant, Tobacco Enforcement Initiative, Hepatitis B Prevention, Administrative Care Coordination Grant-Expansion, Assistance in Community Integration Services (ACIS), Maryland Children Health Program (MCHP) Eligibility Determination-Pregnant Women and Children (PWC), Continuum of Care, and State Opioid Response III Detention Medication Opioid Use Disorder (MOUD)	\$1,453,300
Add: New Grant — Tobacco Use Diabetes, Consortium Community Supports Partnership, and Early Learning Center (ELC) Enhancing Detection Expansion	888,000
Shift: Divisional Transfer of program — Tobacco Administration, Tobacco Cessation, Tobacco Cigarette Restitution Fund, Tobacco Control Community and Tobacco School Based	(19,500)
Eliminate: Program/Service — Maryland Violence and Injury Prevention, COVID-19 Public Workforce Supplemental Funding, and Federal Block Grant American Rescue Plan Act (ARPA) Mental Health Services	(1,270,600)
Reduce: Existing Program/Service — AIDS Case Management, Dental Sealant D Driver Van, HIV Prevention Services, Implement Ending the Epidemic, General Fund Services, Performance Incentive Grant Fund, Childhood Lead Poisoning Prevention, Adult Evaluation and Review Services, General Medical Assistance Transportation, 988 State and Territory Cooperative Agreement BH003SCA, Administrative/LBHA Core Services Admin Grant, Buprenorphine Initiative, Cities Readiness Initiative, Crisis Services, COVID-19 Public Health Workforce Supplemental Funding, General Fund Mental Services Grant, Maryland Recovery Net, Projects for Assistance in Transition from Homelessness (PATH) and Urban Areas Security Initiative (UASI) - Maryland Emergency Response System (MDERS)	(2,971,600)
Remove: Prior Year Appropriation — Maternal and Child Health Expansion, System of Care, Transition Age Youth and Young Adults Program, Cancer Prevention, Education, Screening and Treatment, Diabetes, Heart Disease and Stroke, and Early Learning Center (ELC) Enhancing Epidemiology and Laboratory Capacity for COVID-19 Through Community-Based Strategies (CTCBS)	(14,297,200)
FY 2027 Proposed Budget	\$48,478,400

SPECIAL REVENUE FUNDS**Opioid Local Abatement Special Revenue Fund**

The FY 2027 proposed Opioid Local Abatement Special Revenue Fund budget for the Health Department is \$3,577,500, a decrease of -\$8,511,900 or -70.4% under the FY 2026 approved budget.

Reconciliation from Prior Year

	Expenditures
FY 2026 Approved Budget	\$12,089,400
Decrease Cost: Compensation — Decrease in anticipated limited term hours	\$(7,700)
Decrease Cost: Fringe Benefits — Decrease in fringe benefits to align with projected costs	(28,200)
Decrease Cost: Operating — Decrease in restitution payments	(8,476,000)
FY 2027 Proposed Budget	\$3,577,500

STAFF AND BUDGET RESOURCES

Authorized Positions	FY 2025 Budget	FY 2026 Budget	FY 2027 Proposed	Change FY26-FY27
General Fund				
Full Time - Civilian	233	235	242	7
Full Time - Sworn	0	0	0	0
Subtotal - FT	233	235	242	7
Part Time	1	1	0	(1)
Limited Term	0	0	0	0

Special Revenue Fund				
Full Time - Civilian	0	2	2	0
Full Time - Sworn	0	0	0	0
Subtotal - FT	0	2	2	0
Part Time	0	0	0	0
Limited Term	0	2	2	0

Grant Program Funds				
Full Time - Civilian	251	251	257	6
Full Time - Sworn	0	0	0	0
Subtotal - FT	251	251	257	6
Part Time	3	3	3	0
Limited Term	95	91	35	(56)

TOTAL				
Full Time - Civilian	484	488	501	13
Full Time - Sworn	0	0	0	0
Subtotal - FT	484	488	501	13
Part Time	4	4	3	(1)
Limited Term	95	93	37	(56)

Positions By Classification	FY 2027		
	Full Time	Part Time	Limited Term
Account Clerk	7	0	1
Accountant	7	0	0
Administrative Aide	37	0	1
Administrative Assistant	11	0	1
Administrative Specialist	11	0	0
Associate Director	5	0	0
Auditor	2	0	0
Budget Assistant	1	0	0
Budget Management Analyst	16	0	0
Building Engineer	1	0	0
Building Security Officer	4	0	0
Citizen Services Specialist	1	0	0
Community Developer	76	1	15
Community Development Aide	1	0	0

Positions By Classification	FY 2027		
	Full Time	Part Time	Limited Term
Community Development Assistant	63	1	4
Community Health Nurse	58	0	0
Community Services Manager	1	0	0
Compliance Specialist	3	0	1
Counselor	28	0	5
Data Entry Operator	1	0	0
Dentist	1	0	0
Deputy Director	2	0	0
Environmental Health Specialist	35	0	0
Epidemiologist	28	0	2
Facilities Manager	1	0	0
Facilities Superintendent	2	0	0
General Clerk	11	0	0
Graphic Artist	1	0	1
Health Aide	9	0	1
Health Officer	1	0	0
Human Resource Analyst	8	0	0
Human Resource Manager	1	0	0
Information Technology Engineer	1	0	0
Information Technology Project Coordinator	1	0	0
Licensed Practical Nurse	2	1	0
Mail Services Operator	2	0	0
Maintenance Services Attendant	1	0	0
Nurse Practitioner	10	0	0
Nutritionist	2	0	0
Permits Specialist	1	0	0
Physician Assistant	1	0	0
Physician Clinical Specialist	1	0	0
Physician Program Manager	1	0	0
Physician Supervisor	1	0	0
Planner	7	0	2
Police Officer Supervisor	1	0	0
Procurement Officer	2	0	0
Programmer-Systems Analyst	5	0	0
Property Standards Inspector	1	0	0
Public Health Lab Scientist	2	0	0
Public Health Program Chief	11	0	0
Public Information Officer	1	0	0
Public Safety Aide	3	0	0
Radiology Technician	1	0	0
Service Aide	0	0	2

Positions By Classification	FY 2027		
	Full Time	Part Time	Limited Term
Social Worker	8	0	1
Supply Property Clerk	1	0	0
TOTAL	501	3	37

Expenditures by Category - General Fund

Category	FY 2025 Actual	FY 2026 Budget	FY 2026 Estimate	FY 2027 Proposed	Change FY26-FY27	
					Amount (\$)	Percent (%)
Compensation	\$21,626,641	\$20,996,000	\$20,704,300	\$22,734,600	\$1,738,600	8.3%
Fringe Benefits	7,241,456	7,180,600	7,308,600	8,025,300	844,700	11.8%
Operating	14,039,679	10,047,600	10,529,400	9,383,200	(664,400)	-6.6%
Capital Outlay	109,275	—	—	—	—	
SubTotal	\$43,017,051	\$38,224,200	\$38,542,300	\$40,143,100	\$1,918,900	5.0%
Recoveries	(1,670,551)	(2,836,000)	(1,929,200)	(2,290,000)	546,000	-19.3%
Total	\$41,346,500	\$35,388,200	\$36,613,100	\$37,853,100	\$2,464,900	7.0%

In FY 2027, compensation expenditures increase 8.3% over the FY 2026 budget due to funding two new positions (Community Developer 4A and a Nutritionist 1A), to support the Food as Medicine program and six full time positions are realigned from grant programs including an Administrative Aide 1A, Budget Management Analyst 2A, and Community Developer 1A to support the Health Assures program, a Community Health Nurse 1A to support the Title V program, a Nurse Practitioner 1A to support the Clinical Care program, and a Community Developer 1A to support the Black Women’s Maternal Health program. Funding supports Countywide salary adjustments, the annualization of FY 2026 salary adjustments, anticipated salary attrition partially offset by a decrease in salary lapse, State special pay positions, and three positions realigned to grant programs. Compensation costs include funding for 242 full time positions. Fringe benefit expenditures increase 11.8% over the FY 2026 budget to align with projected costs.

Operating expenses decrease -6.6% under the FY 2026 budget primarily due to transferring telephone services to Microsoft Teams, reduced cost for temporary staff, and the realignment of the Black Women’s Maternal Health Program costs to compensation and fringe benefits. Funding supports office automation costs, training, armored truck services, water treatment services, interagency legal fees, and community supported agriculture.

Recoveries decrease -19.3% under the FY 2026 budget to support recoverable compensation, fringe benefits, and operating expenditures from various grants.

Expenditures by Division - General Fund

Category	FY 2025 Actual	FY 2026 Budget	FY 2026 Estimate	FY 2027 Proposed	Change FY26-FY27	
					Amount (\$)	Percent (%)
Administration	\$3,053,899	\$1,577,400	\$4,941,900	\$3,551,700	\$1,974,300	125.2%
Family Health Services	9,895,990	9,638,900	8,501,800	10,012,400	373,500	3.9%
Behavioral Health	2,994,940	2,134,600	1,973,900	2,669,200	534,600	25.0%
Environmental Health - Disease Control	5,931,707	5,789,400	5,579,200	5,957,200	167,800	2.9%
Health and Wellness	1,930,080	2,675,400	2,620,400	2,656,900	(18,500)	-0.7%
Office of the Health Officer	17,539,884	13,572,500	12,995,900	13,005,700	(566,800)	-4.2%
Total	\$41,346,500	\$35,388,200	\$36,613,100	\$37,853,100	\$2,464,900	7.0%

General Fund - Division Summary

Category	FY 2025 Actual	FY 2026 Budget	FY 2026 Estimate	FY 2027 Proposed	Change FY26-FY27	
					Amount (\$)	Percent (%)
Administration						
Compensation	\$3,599,753	\$2,881,000	\$4,650,200	\$4,096,300	\$1,215,300	42.2%
Fringe Benefits	1,063,875	985,300	1,624,200	1,446,000	460,700	46.8%
Operating	60,822	547,100	596,700	299,400	(247,700)	-45.3%
Capital Outlay	—	—	—	—	—	
SubTotal	\$4,724,450	\$4,413,400	\$6,871,100	\$5,841,700	\$1,428,300	32.4%
Recoveries	(1,670,551)	(2,836,000)	(1,929,200)	(2,290,000)	546,000	-19.3%
Total Administration	\$3,053,899	\$1,577,400	\$4,941,900	\$3,551,700	\$1,974,300	125.2%
Family Health Services						
Compensation	\$5,102,719	\$5,280,100	\$4,651,000	\$6,039,700	\$759,600	14.4%
Fringe Benefits	1,850,376	1,805,800	1,705,500	2,131,900	326,100	18.1%
Operating	2,942,895	2,553,000	2,145,300	1,840,800	(712,200)	-27.9%
Capital Outlay	—	—	—	—	—	
SubTotal	\$9,895,990	\$9,638,900	\$8,501,800	\$10,012,400	\$373,500	3.9%
Recoveries	—	—	—	—	—	
Total Family Health Services	\$9,895,990	\$9,638,900	\$8,501,800	\$10,012,400	\$373,500	3.9%
Behavioral Health						
Compensation	\$2,076,407	\$1,169,700	\$1,117,400	\$1,712,200	\$542,500	46.4%
Fringe Benefits	750,664	400,000	376,900	604,500	204,500	51.1%
Operating	167,868	564,900	479,600	352,500	(212,400)	-37.6%
Capital Outlay	—	—	—	—	—	
SubTotal	\$2,994,940	\$2,134,600	\$1,973,900	\$2,669,200	\$534,600	25.0%
Recoveries	—	—	—	—	—	
Total Behavioral Health	\$2,994,940	\$2,134,600	\$1,973,900	\$2,669,200	\$534,600	25.0%
Environmental Health - Disease Control						
Compensation	\$4,336,830	\$4,262,800	\$4,079,500	\$4,351,400	\$88,600	2.1%
Fringe Benefits	1,475,196	1,457,900	1,431,000	1,536,000	78,100	5.4%
Operating	119,682	68,700	68,700	69,800	1,100	1.6%
Capital Outlay	—	—	—	—	—	
SubTotal	\$5,931,707	\$5,789,400	\$5,579,200	\$5,957,200	\$167,800	2.9%
Recoveries	—	—	—	—	—	
Total Environmental Health - Disease Control	\$5,931,707	\$5,789,400	\$5,579,200	\$5,957,200	\$167,800	2.9%

General Fund - Division Summary *(continued)*

Category	FY 2025 Actual	FY 2026 Budget	FY 2026 Estimate	FY 2027 Proposed	Change FY26-FY27	
					Amount (\$)	Percent (%)
Health and Wellness						
Compensation	\$1,254,568	\$1,754,800	\$1,702,800	\$1,652,900	\$(101,900)	-5.8%
Fringe Benefits	523,323	600,100	599,200	583,500	(16,600)	-2.8%
Operating	152,189	320,500	318,400	420,500	100,000	31.2%
Capital Outlay	—	—	—	—	—	
SubTotal	\$1,930,080	\$2,675,400	\$2,620,400	\$2,656,900	\$(18,500)	-0.7%
Recoveries	—	—	—	—	—	
Total Health and Wellness	\$1,930,080	\$2,675,400	\$2,620,400	\$2,656,900	\$(18,500)	-0.7%
Office of the Health Officer						
Compensation	\$5,256,364	\$5,647,600	\$4,503,400	\$4,882,100	\$(765,500)	-13.6%
Fringe Benefits	1,578,022	1,931,500	1,571,800	1,723,400	(208,100)	-10.8%
Operating	10,596,223	5,993,400	6,920,700	6,400,200	406,800	6.8%
Capital Outlay	109,275	—	—	—	—	
SubTotal	\$17,539,884	\$13,572,500	\$12,995,900	\$13,005,700	\$(566,800)	-4.2%
Recoveries	—	—	—	—	—	
Total Office of the Health Officer	\$17,539,884	\$13,572,500	\$12,995,900	\$13,005,700	\$(566,800)	-4.2%
Total	\$41,346,500	\$35,388,200	\$36,613,100	\$37,853,100	\$2,464,900	7.0%

DIVISION OVERVIEW

Administration

The Division of Administration provides the administrative support structure for the department’s public health programs. This unit provides support to the General Fund and grant programs through centralized fiscal (budget, accounts payable, collections, and purchase card), procurement, contractual, grant compliance, vital records, and general services. The division also includes a medical billing group, provider credentialing, and insurance support for recovering funds for services rendered.

Fiscal Summary

In FY 2027, the division expenditures increase \$1,974,300 or 125.2% over the FY 2026 budget. Staffing resources increase by eight positions from the FY 2026 budget. The primary budget changes include:

- An increase in personnel costs due to the transfer of the Human Resource Manager and eight Human Resource Analyst positions from the Office of the Health Officer to this division, Countywide salary adjustments, State special pay positions, projected healthcare, and pension costs. Funding is partially

offset by one position transferring from this division to the Office of the Health Officer.

- A decrease in operating costs primarily due to reduced funding for telephone services transferred to Microsoft Teams, mileage, and postage which is partially offset by an increase in armored truck services, training, memberships, equipment lease and interagency legal assistance fees.
- An increase in recoveries to support recoverable compensation, fringe benefits, and operating expenditures from various grants.

	FY 2026 Budget	FY 2027 Proposed	Change FY26-FY27	
			Amount (\$)	Percent (%)
Total Budget	\$1,577,400	\$3,551,700	\$1,974,300	125.2%
STAFFING				
Full Time - Civilian	34	42	8	23.5%
Full Time - Sworn	0	0	0	0.0%
Subtotal - FT	34	42	8	23.5%
Part Time	0	0	0	0.0%
Limited Term	0	0	0	0.0%

Family Health Services

The Family Health Services Division offers clinical and preventive health services to women, children, and their families both in public health clinics and in their homes. Women’s services include prenatal and postnatal care, dental care for pregnant women, family planning, pregnancy testing, and health and nutritional education. Children receive immunizations, developmental assessments, and referrals to medical specialty care for handicapping conditions. The division assists pregnant women and children in receiving comprehensive health care services through the Maryland Children’s Health Program by providing on-site eligibility determination, managed care education, and provider selection.

Fiscal Summary

In FY 2027, the division expenditures increase \$373,500 or 3.9% over the FY 2026 budget. Staffing resources increase by five positions from the FY 2026 budget. The primary budget change includes:

- An increase in personnel costs due to six full time merit grant positions transferring to the General Fund, including an Administrative Aide 1A, a Budget Management Analyst 2A, and Community Developer 1A to support the Health Assures program, a Community Health Nurse to support the Title V program, a Nurse Practitioner 1A to support the Clinical Care program, and a Community Developer 1A to support the Black Women’s Maternal Health program. Funding also supports Countywide salary

adjustments, State special payments, overtime, and budgeted attrition. Funding is partially offset by two positions transferring to grant programs. In FY 2026, the department filled an additional Community Health Nurse position to meet program needs.

- Fringe benefits costs align with projected healthcare and pension costs.
- A decrease in operating expenses for general and administrative contracts for underinsured residents and the Black Women’s Maternal Health program costs are realigned to compensation and fringe benefits, mileage, and other operating equipment maintenance. Funding support is offset by a decrease in training, general and administrative contracts, general office supplies, and building repair and maintenance.

	FY 2026 Budget	FY 2027 Proposed	Change FY26-FY27	
			Amount (\$)	Percent (%)
Total Budget	\$9,638,900	\$10,012,400	\$373,500	3.9%
STAFFING				
Full Time - Civilian	58	63	5	8.6%
Full Time - Sworn	0	0	0	0.0%
Subtotal - FT	58	63	5	8.6%
Part Time	0	0	0	0.0%
Limited Term	0	0	0	0.0%

Behavioral Health

The Behavioral Health Division assist residents in preventing and recovering from behavioral health issues. Tobacco education and cessation services are also provided. The General Fund Services grant provides peer-to-peer services, adolescent recovery clubhouse, case management, and jail-based treatment. The division also provides substance abuse disorder treatment, recovery, and reentry services to adults in the criminal justice system.

Fiscal Summary

In FY 2027, the division expenditures increase \$534,600 or 25.0% over the FY 2026 budget. Staffing resources remain unchanged from the FY 2026 budget. The primary budget changes include:

- An increase in personnel costs due to Countywide salary adjustments and budgeted attrition.
 - An increase in fringe benefits costs to align with projected healthcare and pension costs.
- A decrease in operating expenses for equipment lease costs, general and administrative laboratory services contracts, and operating contracts for security costs. Funding is offset by an increase in strategic planning, membership fees, office rental for Adams House, and operating contracts for custodial services.

	FY 2026 Budget	FY 2027 Proposed	Change FY26-FY27	
			Amount (\$)	Percent (%)
Total Budget	\$2,134,600	\$2,669,200	\$534,600	25.0%
STAFFING				
Full Time - Civilian	16	16	0	0.0%
Full Time - Sworn	0	0	0	0.0%
Subtotal - FT	16	16	0	0.0%
Part Time	0	0	0	0.0%
Limited Term	0	0	0	0.0%

Environmental Health - Disease Control

The Environmental Health/Disease Control Division is responsible for the licensing and/or inspection of all food service facilities, public swimming pools and spas, private water supplies and sewage disposal systems, solid waste facilities, and the review of plans for all new and proposed facilities.

The Food Protection Program performs inspections of all food service facilities and provides the environmental response to all food borne outbreak investigations. The Permits and Plan Review Program evaluates and approves plans for new or remodeled food service, recreational facilities and reviews, and approves, all permit applications for all food service and recreational facilities.

The Environmental Engineering Program permits on-site sewage disposal systems (including Innovative and Alternative systems and shared sewage disposal facilities) and individual water supplies as well as approves new subdivisions utilizing private or shared systems.

The division also provides clinical services and disease investigations to reduce the risk of communicable diseases, immunizations, clinical services, prevention education, animal exposure management, outbreak investigations, and communicable and vector-borne disease control. The Communicable Disease Surveillance Program maintains a database of reportable diseases, produces monthly statistics and analyzes disease trends. Surveillance activities produce disease

information and statistics, for public health and medical providers.

Fiscal Summary

In FY 2027, the division expenditures increase \$167,800 or 2.9% over the FY 2026 budget. Staffing resources remain unchanged from the FY 2026 budget. The primary budget changes include:

- An increase in personnel costs for Countywide salary adjustments offset by attrition and State special pay positions.
- An increase in fringe benefits to align with anticipated healthcare and pension costs.
- An increase in operating costs for office equipment non-capital. Funding is provided for general office supplies, language interpretation services, printing, and training.

	FY 2026 Budget	FY 2027 Proposed	Change FY26-FY27	
			Amount (\$)	Percent (%)
Total Budget	\$5,789,400	\$5,957,200	\$167,800	2.9%
STAFFING				
Full Time - Civilian	55	55	0	0.0%
Full Time - Sworn	0	0	0	0.0%
Subtotal - FT	55	55	0	0.0%
Part Time	0	0	0	0.0%
Limited Term	0	0	0	0.0%

Health and Wellness

The Health and Wellness Division is responsible for chronic disease and access to care programs. Programs identify services available to assist the elderly and chronically ill, which allow them to remain in the community in the least restrictive environment while functioning at the highest possible level of independence. For eligible clients, medical assistance grants provide in-home services and transportation.

Fiscal Summary

In FY 2027, the division expenditures decrease -\$18,500 or -0.7% under the FY 2026 budget. Staffing resources increase by two from the FY 2026 budget. The primary budget change includes:

- A decrease in personnel costs due to reduced State special payments offset by one new Community Developer 4A and one new Nutritionist 1A to support the Food as Medicine program. Funding includes an adjustment in the staffing complement for a part

time Community Health Nurse 4A converting to full time and Countywide salary adjustments.

- A decrease in fringe benefits to align with projected healthcare and pension costs.
- An increase in operating to support community supported agriculture operating contracts. Funding is provided for nurse monitoring and assessment evaluation review services, mileage, and general office supplies.

	FY 2026 Budget	FY 2027 Proposed	Change FY26-FY27	
			Amount (\$)	Percent (%)
Total Budget	\$2,675,400	\$2,656,900	\$(18,500)	-0.7%
STAFFING				
Full Time - Civilian	15	17	2	13.3%
Full Time - Sworn	0	0	0	0.0%
Subtotal - FT	15	17	2	13.3%
Part Time	1	0	(1)	0.0%
Limited Term	0	0	0	0.0%

Office of the Health Officer

The Office of the Health Officer directs the public health programs and activities in conformance with applicable laws, regulations, policies, human resources, procedures, and standards of the State of Maryland and the County. The Office of the Health Officer assures high standards of clinical care in the department and provides public health expertise and direction. The Office also coordinates and facilitates federal, State and local resources and partnerships to improve health access to care for County uninsured and underinsured residents. The Office has direct responsibility for facility maintenance and security for the health centers.

Planning staff conduct community needs assessments, write health status reports, and develop local health plans in accordance with federal, State, and regional initiatives. The staff also collect, analyze, and interpret health-related statistical data to identify populations at risk, establish health priorities, and facilitate grant applications to expand access to health care in order to improve the status of the health of all residents and to eliminate health disparities.

The visual communications staff design, produce, and distribute health information materials for public education and review existing materials for the quality of content and cultural appropriateness. The Public Information Officer coordinates the department’s responses to all inquiries from the media, requests for information under the Maryland Public Information Act, and legislative activities.

Fiscal Summary

In FY 2027, the division expenditures decrease -\$566,800 or -4.2% under the FY 2026 budget. Staffing resources decrease by eight positions from the FY 2026 budget. The primary budget changes include:

- A net decrease in personnel costs primarily due to nine positions transferring from this Office to the Division of Administration. Funding is offset by Countywide salary adjustments, State special payments, one Information Technology Project Coordinator position realigned from the Division of Administration, and matching funds realigned from operating expenses for the STOP grant program.
- A decrease in fringe benefits to align with projected healthcare and pension costs.
- An increase in operating primarily due to technology costs, water treatment services, training for the technology staff, and vehicle maintenance.

	FY 2026 Budget	FY 2027 Proposed	Change FY26-FY27	
			Amount (\$)	Percent (%)
Total Budget	\$13,572,500	\$13,005,700	\$(566,800)	-4.2%
STAFFING				
Full Time - Civilian	57	49	(8)	-14.0%
Full Time - Sworn	0	0	0	0.0%
Subtotal - FT	57	49	(8)	-14.0%
Part Time	0	0	0	0.0%
Limited Term	0	0	0	0.0%

OTHER FUNDS

Opioid Local Abatement Special Revenue Fund

The Opioid Local Abatement Special Revenue Fund supports opioid abatement initiatives in the County, including prevention, harm reduction, treatment recovery and public safety. Revenues received by the State, opioid manufactures, or research associations, and interest earned, shall be held in the fund. Expenditures shall be for permitted uses that serve the purpose of future opioid remediation as set forth in the National Settlement Agreement. Funding will be received from two sources: 1. a direct allotment from the State representing the County's share of the National Opioid Settlement, and 2. an allotment from the State's Abatement Fund. Prince George's County is one of 58 Maryland subdivisions that is participating in the national opioid settlements.

Fiscal Summary

In FY 2027, the Opioid Local Abatement Fund revenues total \$3,577,500, a decrease of -\$8,511,900 or -70.4% under the FY 2026 approved budget.

Compensation expenditures decrease -2.2% under the FY 2026 budget primarily due to anticipated limited term position hours. Compensation costs include anticipated funding for four positions. Fringe benefits expenditures decrease -23.1% under the FY 2026 budget to reflect anticipated costs.

Operating expenditures decrease -73.0% under the FY 2026 budget to reflect reduced restitution payments.

Expenditures by Category

Category	FY 2025 Actual	FY 2026 Budget	FY 2026 Estimate	FY 2027 Proposed	Change FY26-FY27	
					Amount (\$)	Percent (%)
Compensation	\$—	\$357,600	\$201,300	\$349,900	\$(7,700)	-2.2%
Fringe Benefits	—	122,300	51,900	94,100	(28,200)	-23.1%
Operating	—	11,609,500	—	3,133,500	(8,476,000)	-73.0%
Total	\$—	\$12,089,400	\$253,200	\$3,577,500	\$(8,511,900)	-70.4%
Total	\$—	\$12,089,400	\$253,200	\$3,577,500	\$(8,511,900)	-70.4%

Fund Summary

Category	FY 2025 Actual	FY 2026 Budget	FY 2026 Estimated	FY 2027 Proposed	FY 2026-2027	
					Change \$	Change %
BEGINNING FUND BALANCE	\$—	\$—	\$—	\$10,479,100	\$10,479,100	0.0%
REVENUES						
Abatement Payments	\$—	\$8,000,000	\$6,642,900	\$3,577,500	\$(4,422,500)	-55.3%
Appropriated Fund Balance	—	—	—	—	—	0.0%
Transfers	—	4,089,400	4,089,400	—	(4,089,400)	-100.0%
Total Revenues	\$—	\$12,089,400	\$10,732,300	\$3,577,500	\$(8,511,900)	-70.4%
EXPENDITURES						
Compensation	\$—	\$357,600	\$201,300	\$349,900	\$(7,700)	-2.2%
Fringe	—	122,300	51,900	94,100	(28,200)	-23.1%
Operating Expenses	—	11,609,500	—	3,133,500	(8,476,000)	-73.0%
Capital Outlay	—	—	—	—	—	0.0%
Total Expenditures	\$—	\$12,089,400	\$253,200	\$3,577,500	\$(8,511,900)	-70.4%
EXCESS OF REVENUES OVER EXPENDITURES	—	—	10,479,100	—	—	0.0%
OTHER ADJUSTMENTS	—	—	—	—	—	0.0%
ENDING FUND BALANCE	\$—	\$—	\$10,479,100	\$10,479,100	\$10,479,100	0.0%

GRANT FUNDS SUMMARY

Expenditures by Category - Grant Funds

Category	FY 2025 Actual	FY 2026 Budget	FY 2026 Estimate	FY 2027 Proposed	Change FY26-FY27	
					Amount (\$)	Percent (%)
Compensation	\$14,758,207	\$20,207,100	\$17,989,700	\$19,432,200	\$(774,900)	-3.8%
Fringe Benefits	4,962,259	6,910,800	6,403,900	6,667,900	(242,900)	-3.5%
Operating	26,553,774	37,683,100	30,005,400	22,483,300	(15,199,800)	-40.3%
Capital Outlay	—	—	—	—	—	—
SubTotal	\$46,274,240	\$64,801,000	\$54,399,000	\$48,583,400	\$(16,217,600)	-25.0%
Recoveries	—	—	—	—	—	—
Total	\$46,274,240	\$64,801,000	\$54,399,000	\$48,583,400	\$(16,217,600)	-25.0%

The FY 2027 proposed grant budget is \$48,583,400, a decrease of -25.0% under the FY 2026 approved budget. This decrease is primarily driven by the removal of prior year appropriation for the Disease, Heart Disease and Stroke, Maternal and Child Health Expansion, System of Care, and Transition Age Youth and Young Adults programs. New funding is anticipated for the Tobacco Use Diabetes and Consortium Community Supports Partnership, and Early Learning Center (ELC) Enhancing Detection Expansion programs.

Staff Summary by Division - Grant Funds

Staff Summary by Division & Grant Program	FY 2026			FY 2027		
	FT	PT	LTGF	FT	PT	LTGF
Family Health Services						
AIDS Case Management	31	—	9	27	—	—
Asthma Initiative	1	—	—	—	—	—
Babies Born Healthy	2	—	—	2	—	—
Ending the Epidemic HRSA	—	—	2	—	—	3
Ending the HIV Epidemic in STD Clinics	—	—	4	—	—	—
Hepatitis B Prevention	3	—	—	—	—	—
HIV Prevention	9	1	3	9	1	—
Immunization Action Grant	3	—	—	1	—	—
Implement Ending the Epidemic	8	—	3	8	—	—
Oral Disease and Injury Prevention	2	—	—	—	—	—
Personal Responsibility Education	—	—	1	—	—	—
Reproductive Health	7	—	—	7	—	—
STD Caseworker	13	—	2	14	—	1
Surveillance and Quality Improvement	1	—	—	1	—	—
TB Control Cooperative Agreement	2	—	—	—	—	—
WIC Breastfeeding Peer Counseling	3	—	2	2	—	—

Staff Summary by Division - Grant Funds *(continued)*

Staff Summary by Division & Grant Program	FY 2026			FY 2027		
	FT	PT	LTGF	FT	PT	LTGF
Women, Infants, and Children (WIC)	23	—	6	22	—	1
Total Family Health Services	108	1	32	93	1	5
Behavioral Health						
Adult Reentry Program	2	—	—	2	—	—
Bridges to Success	1	—	4	2	—	6
Cannabis Prevention and Control Planning Grant	—	—	—	1	—	—
Children In Need of Assistance H.B. 7 Integration of Child Welfare Funds	—	—	—	4	—	—
Drug Court Services	1	—	—	1	—	—
Federal Fund Adult Treatment Grant	4	—	1	—	—	—
Federal SUD Services Grant	—	—	—	5	—	1
General Fund Services	12	—	—	19	1	1
Maryland Injury and Violence Prevention	8	—	—	—	—	—
Mental Health Services Grant	—	—	1	—	—	—
Opioid-Impacted Family Support Program	—	—	—	2	—	—
Opioid Operations	1	—	—	1	—	—
Prevention Services	2	—	—	3	—	—
Project Safety Net	12	—	3	12	—	1
Recovery Support Coordinators in Pregnancy/Postpartum Project	—	—	—	1	—	—
Substance Abuse Treatment Outcomes Partnership (STOP)	7	—	6	8	—	2
System of Care	1	—	—	1	—	—
Temporary Cash Assistance	3	—	1	4	—	2
Tobacco Cigarette Restitution Fund	—	—	—	5	—	1
Tobacco Control Community	1	—	—	—	—	—
Tobacco Enforcement Initiative	1	—	2	1	—	3
Transition Age Youth and Young Adults	1	—	—	1	—	—
Total Behavioral Health	57	—	18	73	1	17
Environmental Health - Disease Control						
Childhood Lead Poisoning Prevention	2	—	6	1	—	1

Staff Summary by Division - Grant Funds (continued)

Staff Summary by Division & Grant Program	FY 2026			FY 2027		
	FT	PT	LTGF	FT	PT	LTGF
Hepatitis B Prevention	—	—	—	1	—	—
Total Environmental Health - Disease Control	2	—	6	2	—	1
Health and Wellness						
Administrative Care Coordination	12	—	—	11	—	—
Assistance in Community Integration Services (ACIS)	1	—	—	2	—	—
Adult Evaluation Review Services	9	—	—	9	—	—
Diabetes, Heart Disease and Stroke	3	—	7	4	—	2
MCHP Eligibility Determination	23	1	4	23	1	1
General Medical Assistance Transportation	13	—	1	13	—	—
Total Health and Wellness	61	1	12	62	1	3
Office of the Health Officer						
Cities Readiness Initiative (CRI)	—	—	—	1	—	1
Community Health Integrated Service System Program	2	—	2	—	—	—
Consortium Community Supports Partnership	—	—	—	2	—	—
Continuum of Care	—	—	—	—	—	1
General Fund Mental Health Services	—	—	—	—	—	1
Local Behavioral Health Authority	15	—	20	17	—	2
Public Health Emergency Preparedness (PHEP)	4	—	1	3	—	—
Public Health Workforce Supplemental Funding	—	—	—	2	—	2
Strengthening Maryland Public Health Infrastructure	2	1	—	2	—	2
Total Office of the Health Officer	23	1	23	27	—	9
Total	251	3	91	257	3	35

In FY 2027, funding is provided for 257 full time positions, three part time positions, and 35 limited term grant funded (LTGF) positions. Full time positions increase by three positions realigned from the General Fund and ten positions converted from LTGF, offset by a decrease of seven positions transferring to the General Fund. LTGF positions decrease by 56 from the FY 2026 approved budget.

Grant Funds by Division

Grant Name	FY 2025 Actual	FY 2026 Budget	FY 2026 Estimate	FY 2027 Proposed	Change FY26-FY27	
					Amount (\$)	Percent (%)
Family Health Services						
AIDS Case Management	\$2,774,908	\$3,554,000	\$3,769,000	\$3,550,000	\$(4,000)	-0.1%
Asthma Initiative	74,234	—	—	—	—	
Babies Born Healthy	181,829	240,300	240,300	240,300	—	0.0%
COVID Mass Vaccination CARES	117,856	—	—	—	—	
Dental Sealant D Driver Van	2,864	32,100	10,000	10,000	(22,100)	-68.8%
Ending the Epidemic HRSA	1,369,067	820,000	1,297,600	1,300,000	480,000	58.5%
Ending the HIV Epidemic in STD Clinics	16,769	—	—	—	—	
Fee for Service	6,759	—	—	—	—	
HIV Prevention Services	542,428	1,100,000	804,000	804,000	(296,000)	-26.9%
Immunization Action Grant	219,200	304,900	324,900	325,000	20,100	6.6%
Implement Ending the Epidemic	1,256,192	1,800,000	1,750,000	1,750,000	(50,000)	-2.8%
Integrated Maternal	92,890	200,000	200,000	200,000	—	0.0%
Maryland Vaccine Program	—	—	136,700	—	—	
Maternal and Child Health Expansion	—	5,000,000	—	—	(5,000,000)	-100.0%
Oral Disease and Injury Prevention	23,600	49,000	48,400	53,500	4,500	9.2%
Personal Responsibility Education (PREP)	72,644	73,000	72,600	73,000	—	0.0%
Reproductive Health	546,713	650,000	650,000	685,000	35,000	5.4%
STD Caseworker	1,202,665	1,200,000	1,200,000	1,200,000	—	0.0%
Surveillance and Quality Improvement	117,061	131,000	131,000	131,000	—	0.0%
TB Control Cooperative Agreement	95,239	25,000	25,000	25,000	—	0.0%
WIC Breastfeeding Peer Counseling	47,750	228,000	228,000	228,000	—	0.0%
Women, Infants and Children (WIC)	1,358,495	2,400,000	2,341,100	2,400,000	—	0.0%
Total Family Health Services	\$10,119,163	\$17,807,300	\$13,228,600	\$12,974,800	\$(4,832,500)	-27.1%
Behavioral Health						
Adult Reentry Program	\$233,226	\$400,000	\$400,000	\$400,000	\$—	0.0%
American Rescue Plan Mental Health One-Time Supplemental Funding	44,624	—	—	—	—	
Bridges 2 Success	553,848	601,200	601,100	601,200	—	0.0%
Cannabis Prevention and Control Planning Grant	1,576	60,000	60,000	60,000	—	0.0%
Children In Need of Assistance H.B. 7 Integration of Child Welfare Funds	—	425,600	416,100	425,600	—	0.0%
Drug Court Services	21,941	147,200	147,100	147,200	—	0.0%

Grant Funds by Division (continued)

Grant Name	FY 2025 Actual	FY 2026 Budget	FY 2026 Estimate	FY 2027 Proposed	Change FY26-FY27	
					Amount (\$)	Percent (%)
Emergency Risk Protection Order	818	400,000	400,000	400,000	—	0.0%
Federal Fund Adult Treatment Grant	777,237	—	—	—	—	
Federal SUD Services Grant	—	948,500	948,500	948,600	100	0.0%
General Fund Services	2,082,303	3,939,900	3,368,100	3,420,200	(519,700)	-13.2%
Maryland Violence and Injury Prevention	11,607	22,000	—	—	(22,000)	-100.0%
Opioid-Impacted Family Support Program	99,053	600,000	600,000	600,000	—	0.0%
Opioid Abatement Fund	346,635	—	—	—	—	
Opioid Operation Command Center Block	79,786	261,400	261,300	261,400	—	0.0%
Opioid MOOR Prevention Strategies for at Risk High School Aged Youth	117,740	—	—	—	—	
Opioid Overdose Prevention & Education Competitive	43,683	—	—	—	—	
Performance Incentive Grant Fund	—	397,400	311,100	311,200	(86,200)	-21.7%
Prevention Services	508,382	502,800	502,700	502,800	—	0.0%
Project Safety Net - (GOCPP)	921,883	1,214,700	1,214,600	1,214,700	—	0.0%
Recovery Support Coordinators in Pregnancy/Postpartum Project	—	92,700	92,600	92,700	—	0.0%
Recovery Support Pregnant/Postpartum Women and Women with Children Enhancements	3,132	26,200	26,100	26,200	—	0.0%
Substance Abuse Treatment Outcomes Partnership (STOP)	438,692	804,600	804,600	804,600	—	0.0%
Substance Abuse Treatment Services - SATS Program TCA	427,120	—	—	—	—	
System of Care	579,408	3,000,000	1,000,000	—	(3,000,000)	-100.0%
Temporary Cash Assistance	739	516,400	516,400	516,400	—	0.0%
Tobacco Administration	—	19,500	—	—	(19,500)	-100.0%
Tobacco Cessation	102,995	13,300	—	—	(13,300)	-100.0%
Tobacco Cigarette Restitution Fund	—	—	278,300	279,400	279,400	
Tobacco Control Community	253,019	107,700	—	—	(107,700)	-100.0%
Tobacco Enforcement Initiative	158,071	130,000	220,000	220,000	90,000	69.2%
Tobacco School Based	21,414	158,400	—	—	(158,400)	-100.0%
Tobacco Use Diabetes	50,697	—	93,800	93,800	93,800	
Transition Age Youth and Young Adults Program	407,610	2,250,000	750,000	—	(2,250,000)	-100.0%
Total Behavioral Health	\$8,287,239	\$17,039,500	\$13,012,400	\$11,326,000	\$(5,713,500)	-33.5%

Grant Funds by Division *(continued)*

Grant Name	FY 2025 Actual	FY 2026 Budget	FY 2026 Estimate	FY 2027 Proposed	Change FY26-FY27	
					Amount (\$)	Percent (%)
Environmental Health - Disease Control						
Bay Restoration (Septic) Fund	\$138,596	\$135,000	\$135,000	\$135,000	\$—	0.0%
Childhood Lead Poisoning Prevention	262,314	348,400	278,800	328,700	(19,700)	-5.7%
Hepatitis B Prevention	39,673	68,500	68,500	122,800	54,300	79.3%
Public Health Emergency Preparedness	456,753	—	—	—	—	
Total Environmental Health - Disease Control	\$897,336	\$551,900	\$482,300	\$586,500	\$34,600	6.3%
Health and Wellness						
Administrative Care Coordination Grant-Expansion	\$1,161,491	\$1,225,900	\$1,225,900	\$1,507,000	\$281,100	22.9%
Adult Evaluation and Review Services	1,026,376	1,755,900	1,335,500	1,196,100	(559,800)	-31.9%
Assistance in Community Integration Services (ACIS)	317,720	639,800	639,800	752,300	112,500	17.6%
Blood Pressure Monitoring	—	—	2,000	—	—	
Cancer Prevention, Education, Screening and Treatment Program	—	847,200	—	—	(847,200)	-100.0%
Diabetes, Heart Disease and Stroke	1,099,019	3,000,000	1,000,000	—	(3,000,000)	-100.0%
Early Learning Center Enhancing Epidemiology and Laboratory Capacity for COVID-19 Through Community-Based Strategies	12,876	200,000	—	—	(200,000)	-100.0%
General Medical Assistance Transportation	4,490,421	4,529,800	6,900,500	3,346,600	(1,183,200)	-26.1%
Heart Month Campaign	—	—	10,000	—	—	
MCHP Eligibility Determination-PWC	2,241,425	2,260,600	2,260,600	2,592,300	331,700	14.7%
Maryland Medical Assistance DPP Ancillary	4,838	75,000	75,000	75,000	—	0.0%
Total Health and Wellness	\$10,354,166	\$14,534,200	\$13,449,300	\$9,469,300	\$(5,064,900)	-34.8%
Office of the Health Officer						
988 State and Territory Cooperative Agreement BH003SCA	\$677,028	\$677,000	\$623,400	\$623,400	\$(53,600)	-7.9%
988 State Crisis System Funding	2,276,757	3,469,600	3,469,600	3,469,600	—	0.0%
Administrative/LBHA Core Services	2,002,865	2,395,500	2,358,900	2,358,900	(36,600)	-1.5%
Behavioral Health Crisis Pilot Program	1,473,103	—	—	—	—	
Buprenorphine Initiative	—	30,000	15,000	15,000	(15,000)	-50.0%
Cities Readiness Initiative	91,218	211,900	211,100	211,100	(800)	-0.4%
Community Health Integration Service System Program	2,655,686	—	—	—	—	

Grant Funds by Division (continued)

Grant Name	FY 2025 Actual	FY 2026 Budget	FY 2026 Estimate	FY 2027 Proposed	Change FY26-FY27	
					Amount (\$)	Percent (%)
Consortium Community Supports Partnership	—	—	350,000	350,000	350,000	
Continuum of Care	760,982	763,600	763,600	763,700	100	0.0%
COVID-19 Public Health Workforce Supplemental Funding	213,525	300,000	—	—	(300,000)	-100.0%
Crisis Services	733,320	806,700	786,500	786,500	(20,200)	-2.5%
Early Learning Center (ELC) Enhancing Detection Expansion	358,862	—	444,100	444,200	444,200	
Federal Block Grant ARPA Mental Health Services	788,503	948,600	—	—	(948,600)	-100.0%
Federal Fund Block Mental Health	1,751,566	1,771,500	1,771,400	1,771,500	—	0.0%
General Fund Mental Health Services	1,450,854	1,871,300	1,842,600	1,842,600	(28,700)	-1.5%
Health Literacy Enhancement	52,994	—	—	—	—	
Local Health Department Health Disparities	59,396	—	—	—	—	
Maryland Recovery Net	3,890	10,000	4,000	4,000	(6,000)	-60.0%
PATH Program	109,231	109,500	64,400	64,500	(45,000)	-41.1%
Public Health Emergency Preparedness	—	554,600	554,600	554,600	—	0.0%
Public Health Workforce Supplemental Funding	376,488	278,700	278,700	278,700	—	0.0%
State Opioid Response III Detention MOUD	549,975	439,600	483,500	483,500	43,900	10.0%
Urban Areas Security Initiative (UASI) - Maryland Emergency Response System (MDERS)	125,000	125,000	100,000	100,000	(25,000)	-20.0%
Total Office of the Health Officer	\$16,511,243	\$14,763,100	\$14,121,400	\$14,121,800	\$(641,300)	-4.3%
Subtotal	\$46,169,147	\$64,696,000	\$54,294,000	\$48,478,400	\$(16,217,600)	-25.1%
Total Transfer from General Fund - (County Contribution/Cash Match)	105,093	105,000	105,000	105,000	—	0.0%
Total	\$46,274,240	\$64,801,000	\$54,399,000	\$48,583,400	\$(16,217,600)	-25.0%

Grant Descriptions

DIVISION OF FAMILY HEALTH SERVICES -- \$12,974,800

Grant funded programs serve at-risk, predominantly uninsured/underinsured populations including infants and children, adolescents, pregnant women and women of childbearing age through early diagnosis, screening, treatment, counseling, education, follow-up, case management, referral and linkage to Medicaid and nutrition services (including WIC). Funding also supports necessary services to individuals with specific types of communicable diseases such as Sexually Transmitted Diseases and HIV/AIDS and extensive community education activities. Personal Responsibility Education Programs provide pregnancy prevention education before marriage. The Dental Sealant Grant provides dental care to the County public schools via mobile van. Funding will support the Immunization Program to focus on providing immunization services to ensure that children attain full compliance with recommended immunization schedules and can enter school on time.

DIVISION OF BEHAVIORAL HEALTH SERVICES -- \$11,326,000

Grants within this division support services for adults, adolescents, and families with behavioral health needs, including addictions and mental health, as well as prevention services for high-risk youth and families. The Behavioral Health Services Division supports outpatient and intensive outpatient treatment services delivered by Health Department staff, as well as outpatient and residential treatment services delivered through contracts with private providers. The division also receives funding for interventions to target special populations in the community, including but not limited to, tobacco prevention and special services for pregnant and post-partum women. The Division is also responsible for long-range planning for behavioral health services in the County, needs assessments, and the development of alternative resource providers. The opioid funding will address the opioid crisis by increasing access to evidence-based treatment, reducing unmet treatment needs for individuals with opioid disorders and reducing opioid related deaths through the provision of prevention, treatment, and recovery support services. Funding will provide substance abuse disorder treatment, recovery, and reentry services to adults in the

criminal justice system, and firearm use prevention. The Performance Incentive Grant will provide Reentry Housing needs of returning citizens, increase engagement in reentry service at the Bridge Center, and reduce recidivism. The division will also expand services to young adults who have, or are at risk of, developing mental health conditions.

DIVISION OF ENVIRONMENTAL HEALTH AND DISEASE CONTROL -- \$586,500

The Bay Restoration Fund provides funds for on-site sewage disposal system upgrades using the best available technology for nitrogen removal. The division also receives funding for childhood lead poisoning and the promotion of healthy social behaviors with emphasis on Hepatitis B prevention.

DIVISION OF HEALTH AND WELLNESS -- \$9,469,300

Grant funding supports prevention and/or the mitigation of diabetes, heart disease, and stroke through the use of community screens, referral services, and interventions to assist individuals with lifestyle decisions/changes. Medical Assistance grants provide personal care and case management to frail elderly individuals with chronic diseases or developmentally disabled persons transportation to medical appointments for Medical Assistance recipients. Funding supports Epidemiologist and Community Health Workers to provide mandated services. The Assistance In Community Integration Services (ACIS) grant provides assistance to adults reentering the community after incarceration, military service, and/or youth who are trying to find their place in the community. Grant funding is also used to evaluate the needs of individuals at risk of institutionalization and to purchase services to prevent their placement in a nursing home or other health care facility. The division also receives funding to promote children's health programs to increase eligibility determinations and work toward the expansion of State Medicaid accessibility by assisting customers with applying for the health insurance, decreasing the timeline for approval, and specifically focusing on Medicaid for families, adults, children, and pregnant women. Funding will provide cancer prevention, education, screening, and treatment to reduce morbidity and mortality rates of cancer.

OFFICE OF THE HEALTH OFFICER -- \$14,121,800

Grants within this division support planning activities and the integrated efforts between County health civic organizations and health care facilities to train medical practitioners and citizen volunteers in emergency preparedness; establishing dispensing sites and shelters; activities to address infectious respiratory disease testing, monitoring, and reporting; mechanisms to expand the public health workforce; and implementing emergency response strategies in the event of a man-made or natural disaster. The division will also provide oversight to the Local Behavioral Health Authority, Federal Fund Block Mental Health, Continuum of Care, Crisis Services, General Fund Mental Health, and Maryland Recovery Net programs. The Cities Readiness Initiative is specific to incident management. Buprenorphine prescription assistance will be provided to individuals who are uninsured or underinsured to eliminate gaps in dosing for individuals who are prescribed medication to treat opioid use disorder. Funding will also support the 988 Lifeline Call Center as well as recruitment and training to retain a call specialist workforce to staff local centers.

SERVICE DELIVERY PLAN AND PERFORMANCE

Goal 1 — To ensure access to and resources supportive of the health and well-being of County residents.

Objective 1.1 — Increase access to health and well-being resources for County residents.

FY 2031 Target	FY 2024 Actual	FY 2025 Actual	FY 2026 Estimated	FY 2027 Projected	Trend
775,000	641,589	650,755	600,000	700,000	↔

Trend and Analysis

The Health department is committed to ensuring access to healthcare, which is an essential component of the mission and vision. A key way to help increase access is to ensure a trained and knowledgeable community outreach staff is embedded across programs. These community outreach workers connect individually with clients as well as through targeted public outreach events to increase awareness and help residents link to community resources. The resources include Health Assures, which provides funding for healthcare services for residents lacking insurance coverage. The overall impact of these activities is challenging to measure, since increased access to healthcare may not yield immediate results; but will instead help to gradually lessen the burden of disease and disability over time.

The agency saw increases in outreach efforts across all relevant divisions. The Behavioral Health division saw the largest increase due to a change made in programmatic reporting methodology implemented over the last year as well as new staff being onboarded, increasing the division's capacity to conduct outreach events.

Performance Measures

Measure Name	FY 2023 Actual	FY 2024 Actual	FY 2025 Actual	FY 2026 Estimated	FY 2027 Projected
Workload, Demand and Production (Output)					
Overall client contacts	158,759	111,945	158,826	110,000	135,000
Cumulative public outreach efforts	166	155	655	590	600
Impact (Outcome)					
Cumulative residents reached through direct contact or outreach efforts	673,909	641,589	650,755	600,000	700,000

Objective 1.2 — Increase the operational efficiency of the department.

FY 2031 Target	FY 2024 Actual	FY 2025 Actual	FY 2026 Estimated	FY 2027 Projected	Trend
n/a	n/a	n/a	n/a	n/a	n/a

Trend and Analysis

In order to ensure that residents have access to the health and well-being services they need, the Health Department must ensure that it efficiently and effectively utilizes all available resources. This involves successfully obtaining grant funding, ensuring staff are in place to do the work, and spending down funding to achieve grant goals and objectives. One of the biggest barriers to increasing the agency's grant utilization rate is quickly hiring staff. A lengthy hiring process results in delays to program development and service delivery, and impacts the agency's ability to fully expend

all grant funding. Another significant delay results from grants not being loaded in a timely manner, making funds unavailable at the start of the grant project period.

Note: This objective is new for FY 2027. Data will be published when it becomes available.

Goal 2 — To prevent and reduce chronic disease, including obesity, among County residents.

Objective 2.1 — Increase the number of residents enrolled in healthy eating and active living interventions.

FY 2031 Target	FY 2024 Actual	FY 2025 Actual	FY 2026 Estimated	FY 2027 Projected	Trend
n/a	n/a	n/a	n/a	n/a	n/a

Trend and Analysis

The Health department is committed to targeting the common risk factors that contribute to the development of chronic diseases such as diabetes, cancer, and cardiovascular disease. The agency's strategies for the prevention and management of chronic diseases support programming to promote healthy behaviors, early detection and diagnosis of metabolic syndrome, community-specific outreach and education activities, and chronic disease prevention and self-management.

Note: These measures are new for FY 2027. Data will be published when it becomes available.

Objective 2.2 — Promoting access to healthcare and services aimed at addressing social determinants of health.

FY 2031 Target	FY 2024 Actual	FY 2025 Actual	FY 2026 Estimated	FY 2027 Projected	Trend
n/a	n/a	n/a	n/a	n/a	n/a

Trend and Analysis

Note: These measures are new for FY 2027. Data will be published when it becomes available.

Goal 3 — To improve reproductive health care in order to reduce infant mortality and enhance birth outcomes for women in Prince George's County.

Objective 3.1 — Increase the number of women that use Long Active Reversible Contraceptives (LARCs) as their primary birth control method.

FY 2031 Target	FY 2024 Actual	FY 2025 Actual	FY 2026 Estimated	FY 2027 Projected	Trend
75	52	53	55	60	↔

Trend and Analysis

PGCHD is committed to improving birth outcomes for County residents, which requires a partnership with health care providers, community members, community stakeholders, Prince George's County Public Schools, local, State, and federal partners. Although client volume at the Reproductive Health Resource Center has not returned to pre-COVID levels due to changes in federal funding, PGCHD continues to work toward improving birth outcomes, beginning with promoting health, wellness, and prevention. PGCHD does this through its Family Planning and Adolescent Health Clinic

by offering health assessments, nutrition education, mental health assessments, reproductive health, and linkages to medical and community services. Services are available to both male and female residents regardless of their ability to pay for such services.

Note: Measure "Number of Providers" is new for FY 2027. Retroactive data is not available.

Performance Measures

Measure Name	FY 2023 Actual	FY 2024 Actual	FY 2025 Actual	FY 2026 Estimated	FY 2027 Projected
Resources (Input)					
Number of Providers	n/a	n/a	2	2	2
Workload, Demand and Production (Output)					
Family planning appointments kept	1,845	2,389	1,651	75	78
Impact (Outcome)					
Women who began utilizing LARC's (Long Active Reversible Contraceptives)	68	52	53	55	60

Objective 3.2 — Increase the number of healthy babies born to healthy mothers.

FY 2031 Target	FY 2024 Actual	FY 2025 Actual	FY 2026 Estimated	FY 2027 Projected	Trend
n/a	n/a	n/a	n/a	n/a	n/a

Trend and Analysis

There are several initiatives related to reducing maternal, fetal, and infant mortality which are funded through Maryland Department of Health (MDH) and the Health Resources and Services Administration (HRSA). The impact of the Dobbs V Jackson decision is estimated to result in a further 21% increase in pregnancy-related deaths among all women. Black women are expected to experience a 33% increase in deaths, the largest for any population. The agency expects a significant increase in care expenses for infants. Family Health Services received funding in FY 2026 for a new Black Maternal Health Program. The program is also getting additional providers, so it is expected that "home visit referrals for post-partum mothers and children (up to age 2)" will continue to increase.

Note: Majority of measures for Objective 3.2 are new. Data will be published when it becomes available.

Performance Measures

Measure Name	FY 2023 Actual	FY 2024 Actual	FY 2025 Actual	FY 2026 Estimated	FY 2027 Projected
Workload, Demand and Production (Output)					
Home visit referrals for post-partum mothers and children (up to age 2)	709	717	582	1,000	1,000

Goal 4 — To prevent and control disease and infections in order to enhance the health of all the County's residents, workers, and visitors.

Objective 4.1 — Increase percentage of persons with HIV that are successfully linked to care.

FY 2031 Target	FY 2024 Actual	FY 2025 Actual	FY 2026 Estimated	FY 2027 Projected	Trend
94%	88%	87%	90%	92%	↔

Trend and Analysis

Ending the HIV Epidemic (EHE) by 2030 has four goals and several indicators that are used to measure the effectiveness of efforts based on incidence and prevalence. New infections have trended down from 289 in 2019 to 238 in 2024. Goals: Diagnose all people with HIV as early as possible. Treat people with HIV rapidly and effectively to reach sustained viral suppression. Prevent new HIV transmissions by using proven interventions, including pre-exposure prophylaxis (PrEP) and syringe services programs (SSPs). Respond quickly to potential HIV outbreaks to get needed prevention and treatment services to people who need them.

Note: FY 2023 actuals for "Newly diagnosed HIV positive with documented linkage to care" have been restated for accuracy. Measure "Number of clients seen that have achieved viral suppression" is new for FY 2027.

Performance Measures

Measure Name	FY 2023 Actual	FY 2024 Actual	FY 2025 Actual	FY 2026 Estimated	FY 2027 Projected
Workload, Demand and Production (Output)					
New HIV cases per 100,000 persons	33	24	29	30	31
Impact (Outcome)					
Newly diagnosed HIV positive with documented linkage to care	87%	88%	87%	90%	92%
Number of clients seen that have achieved viral suppression	93%	90%	89%	89%	92%

Objective 4.2 — Maintain timely reportable condition investigations to protect residents' health.

FY 2031 Target	FY 2024 Actual	FY 2025 Actual	FY 2026 Estimated	FY 2027 Projected	Trend
14,000	13,777	13,348	16,000	15,000	↓

Trend and Analysis

The Health Department is responsible for investigating reportable conditions, including vaccine preventable diseases, food borne, and water borne outbreaks, and animal bites. In FY 2020, the emergence of COVID-19 highlighted how critical these investigations are to providing timely investigation and guidance to residents, as well as determining potential contacts. The Communicable Disease Program (CDP) is at the forefront of these activities and works in close partnership with the Maryland Department of Health to ensure investigations are conducted in a thorough and timely manner.

In FY 2025 there was a Pertussis outbreak which led to a large increase in "Vaccine preventable disease investigations" for this past fiscal year.

Note: FY 2024 actuals for "Vaccine preventable disease investigations" have been restated for accuracy.

Performance Measures

Measure Name	FY 2023 Actual	FY 2024 Actual	FY 2025 Actual	FY 2026 Estimated	FY 2027 Projected
Workload, Demand and Production (Output)					
Animal bite investigations	1,256	1,446	1,384	1,500	1,600
Vaccine preventable disease investigations	17	14	46	40	35
Number of foodborne/waterborne diseases reported/ investigated	557	870	682	1,000	1,100
Impact (Outcome)					
Total disease investigations	53,016	13,777	13,348	16,000	15,000

Goal 5 — To ensure that Prince George's County's physical environment is safe in order to enhance the health of all residents, workers, and visitors.

Objective 5.1 — Conduct inspections at high and moderate priority food service facilities (FSFs).

FY 2031 Target	FY 2024 Actual	FY 2025 Actual	FY 2026 Estimated	FY 2027 Projected	Trend
63%	56%	49%	55%	58%	↓

Trend and Analysis

The Food Protection Program's focus is to ensure the food produced and eaten in the County is safe through monitoring risk factors, documentation of compliance, and targeting immediate and long-term issues through active managerial control. Annually, high priority food facilities require three inspections and moderate facilities require two inspections. While the Food Protection Program staff consistently performs above industry standards, meeting the State mandate for inspections is a challenge due to staff attrition. Health department staff are also still adapting to software changes which have taken a considerable amount of time to implement and adjust to.

Performance Measures

Measure Name	FY 2023 Actual	FY 2024 Actual	FY 2025 Actual	FY 2026 Estimated	FY 2027 Projected
Workload, Demand and Production (Output)					
High and moderate priority FSFs inspections	3,266	3,481	3,392	3,500	3,750
Impact (Outcome)					
Percentage of State-mandated high and moderate inspections conducted	58%	56%	49%	55%	58%

Goal 6 — To ensure that County residents have access to behavioral health services.

Objective 6.1 — Maintain behavioral health services for underserved County residents.

FY 2031 Target	FY 2024 Actual	FY 2025 Actual	FY 2026 Estimated	FY 2027 Projected	Trend
99%	91%	97%	98%	99%	↑

Trend and Analysis

An array of Public Behavioral Health System services are available to residents of the County, including crisis support, inpatient services, intensive substance use disorder outpatient services, medication-assisted treatment (MAT), outpatient, residential and partial hospitalization treatment services, respite care, residential rehabilitation, supported employment, and targeted case management. In addition to these publicly funded programs, the County has been the recipient of grant funds that assist special populations as well as support recovery-oriented person-centered services. It is critical that County residents have access to trauma-informed, culturally and linguistically competent, person-centered services, as well as the support services necessary to facilitate resiliency and recovery, with a focus on early identification and prevention of behavioral health disorders. To ensure that the full continuum of services is available to all ages, the First Episode Psychosis program was implemented in FY 2022, for youth and young adults, ages 15-30. In FY 2023 grant funded services were expanded to include a therapeutic nursery service which is an early childhood mental health and education program for families with high-risk children, ages three to five.

Note: Majority of measures for Objective 3.2 are new. Data will be published when it becomes available.

Performance Measures

Measure Name	FY 2023 Actual	FY 2024 Actual	FY 2025 Actual	FY 2026 Estimated	FY 2027 Projected
Workload, Demand and Production (Output)					
Programs monitored by Local Behavioral Health Authority that provide behavioral health services to County residents	477	591	630	650	675
Clients served in community behavioral health services (cumulative by month)	7,769	5,302	6,572	6,500	7,000
Impact (Outcome)					
BH clients receiving community-based treatment who were diverted from institutional placement	89%	91%	97%	98%	99%

Objective 6.2 — Ensure emergency behavioral health services are available for County residents.

FY 2031 Target	FY 2024 Actual	FY 2025 Actual	FY 2026 Estimated	FY 2027 Projected	Trend
99%	86%	95%	98%	99%	↔

Trend and Analysis

From FY 2023 through FY 2025, the County experienced a decline in calls to the Crisis Response System (CRS), decreasing from 5,342 calls in FY 2023 to 2,728 in FY 2024 and 2,380 in FY 2025. This downward trend aligns with the

implementation of 988 and the growing public awareness of it as an alternative crisis access point. During the same period, Mobile Crisis Response Team (MCRT) dispatches increased substantially from 691 in FY 2023 to 1,207 in FY 2024 and 1,465 in FY 2025, indicating a shift toward more community-based crisis interventions. The data suggests that while overall call volume has declined, the severity and acuity of crises requiring in-person response have increased. In FY 2026, it is estimated that the number of MCRT dispatches will decrease due to the loss of grant funding in December 2025. As a result, the availability of crisis teams per shift will be reduced, which will affect the ability to respond to community crises. Continued collaboration with crisis continuum partners, response to future grant/funding opportunities, and ongoing system monitoring will be critical to ensure access, responsiveness, and appropriate utilization as the crisis continuum evolves.

Performance Measures

Measure Name	FY 2023 Actual	FY 2024 Actual	FY 2025 Actual	FY 2026 Estimated	FY 2027 Projected
Workload, Demand and Production (Output)					
Calls to the CRS	5,342	2,728	2,380	1,850	2,000
Mobile Crisis Team dispatches	691	1,207	1,465	1,200	1,300
Quality					
Response time for CRS Mobile Crisis Team dispatches (average)	41:30	45:00	43:00	43:00	40:00
Impact (Outcome)					
Clients receiving CRS services who divert institutionalization	88%	86%	95%	98%	99%

