

**Department of State Health Services
Summary of Budget Recommendations - Senate**

II-23

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Method of Financing	2022-23 Base	2024-25 Recommended	Biennial Change (\$)	Biennial Change (%)
General Revenue Funds	\$733,633,457	\$601,822,392	(\$131,811,065)	(18.0%)
GR Dedicated Funds	\$277,363,824	\$295,110,417	\$17,746,593	6.4%
<i>Total GR-Related Funds</i>	<i>\$1,010,997,281</i>	<i>\$896,932,809</i>	<i>(\$114,064,472)</i>	<i>(11.3%)</i>
Federal Funds	\$6,454,014,862	\$975,464,675	(\$5,478,550,187)	(84.9%)
Other	\$250,779,507	\$258,150,451	\$7,370,944	2.9%
All Funds	\$7,715,791,650	\$2,130,547,935	(\$5,585,243,715)	(72.4%)

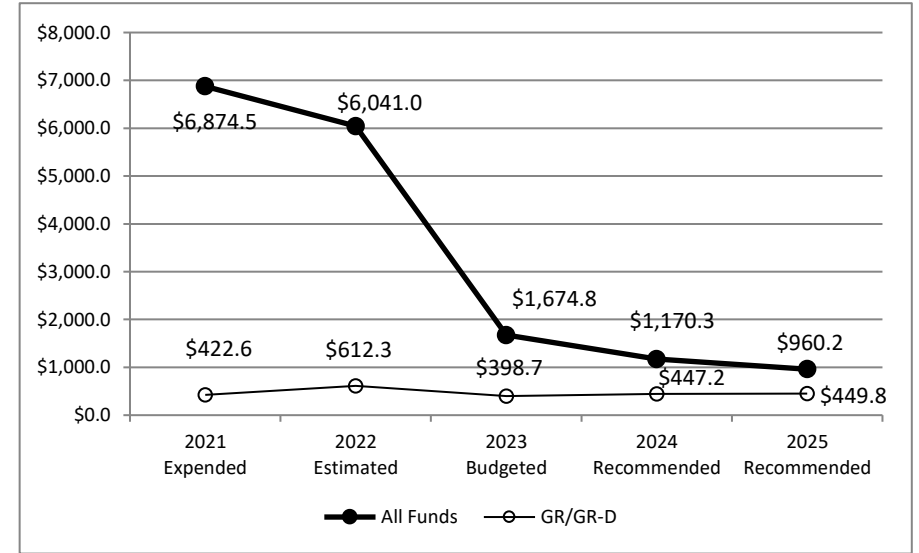
	FY 2023 Budgeted	FY 2025 Recommended	Biennial Change	Percent Change
FTEs	3,900.5	3,304.7	(595.8)	(15.3%)

Agency Budget and Policy Issues and/or Highlights

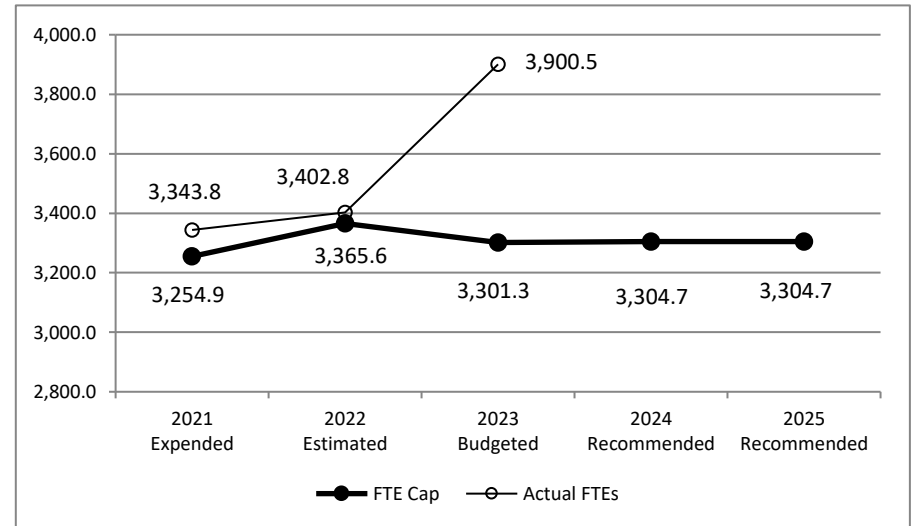
The 2022-23 base includes \$200.1 million in one-time General Revenue funding related to COVID-19 response and one-time start-up costs not included in 2024-25 recommendations. Recommendations include the following adjustments related to one-time COVID-19 funding response: a reduction in 2024-25 of \$1,958.4 million in General Revenue Funds from Senate Bill 8, Third Called Session, Eighty-Seventh Legislature; a reduction of \$200.0 million in General Revenue for a one-time transfer from the Health and Human Services Commission (HHSC); and a Method of Finance swap with the Office of the Governor of \$18.1 million in Federal Funds and General Revenue.

The bill pattern for this agency (2024-25 Recommended) represents an estimated 100.0% of the agency's estimated total available funds for the 2024-25 biennium.

Historical Funding Levels (Millions)



Historical Full-Time-Equivalent Employees (FTEs)



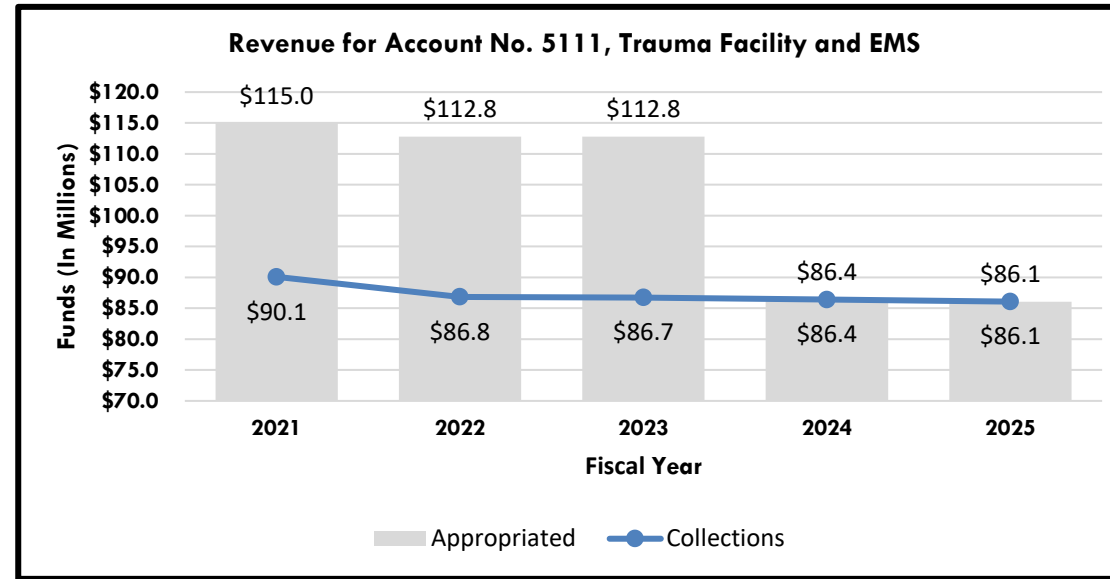
**Department of State Health Services
Summary of Funding Changes and Recommendations - Senate**

Funding Changes and Recommendations for the 2024-25 Biennium compared to the 2022-23 Base Spending Level (in millions)		General Revenue	GR-Dedicated	Federal Funds	Other Funds	All Funds	Strategy in Appendix A
<i>SIGNIFICANT Funding Changes and Recommendations (each issue is explained in Section 3 and additional details are provided in Appendix A):</i>							
A)	Backfill loss of Delivery System Reform Incentive Payment (DSRIP) to Texas Center for Infectious Disease operations	\$6.1	\$0.0	\$0.0	(\$6.3)	(\$0.2)	A.2.5
B)	Align General Revenue - Dedicated Account No. 5111, Truama Facility and EMS Appropriations to Projected Collections	\$0.0	\$6.1	\$0.0	\$0.0	\$6.1	B.2.1
C)	Remove one-time COVID-19 response funding appropriated in Senate Bill 8, Eighty-Seventh Legislature, Third Called Session, net the \$100.0 million Transfer to the Texas Department of Emergency Management pursuant to the October 2022 Budget Execution action	\$0.0	\$0.0	(\$1,958.4)	\$0.0	(\$1,958.4)	Various
D)	Health and Human Services Commission transfer from Medicaid to assist with COVID-19 cashflow needs	(\$200.0)	\$0.0	\$0.0	\$0.0	(\$200.0)	A.1.1
E)	Backfill one-time Method of Finance swap with the Office of the Governor	\$10.5	\$7.6	(\$18.1)	\$0.0	\$0.0	Various
F)	Remove other estimated COVID-19 response Federal Funds	\$0.0	\$0.0	(\$3,481.7)	\$0.0	(\$3,481.7)	Various
<i>OTHER Funding Changes and Recommendations (these issues are not addressed in Section 3 but details are provided in Appendix A):</i>							
G)	Funding provided for statewide salary adjustments	\$23.3	\$5.3	\$7.2	\$0.0	\$35.7	F.1.1
H)	Fully fund Data Center Consolidation Services needs	\$27.7	\$0.0	\$0.0	\$0.0	\$27.7	D.1.1
I)	Method of Finance swap between General Revenue and General Revenue - Dedicated Account No. 5022, Oyster Sales	\$0.8	(\$0.8)	\$0.0	\$0.0	\$0.0	C.1.1
J)	Remove one-time funding for Customer Service Efficiency project start-up	(\$0.1)	(\$0.4)	\$0.0	\$0.0	(\$0.5)	B.2.1, C.1.1, C.1.2, C.1.3
K)	Align to estimated Federal Funds	\$0.0	\$0.0	(\$27.5)	\$0.0	(\$27.5)	Various
L)	Align to estimated Appropriated Receipts	\$0.0	\$0.0	\$0.0	(\$6.8)	(\$6.8)	Various
M)	Align to estimated Interagency Contracts	\$0.0	\$0.0	\$0.0	\$5.2	\$5.2	Various
N)	Align to estimated Other Funds	\$0.0	\$0.0	\$0.0	\$15.3	\$15.3	A.1.3, A.2.2, A.4.1
TOTAL SIGNIFICANT & OTHER Funding Changes and Recommendations (in millions)		(\$131.7)	\$17.8	(\$5,478.5)	\$7.4	(\$5,585.1)	As Listed
SIGNIFICANT & OTHER Funding Increases		\$68.4	\$19.0	\$7.2	\$20.5	\$90.0	As Listed
SIGNIFICANT & OTHER Funding Decreases		(\$200.1)	(\$1.2)	(\$5,485.7)	(\$13.1)	(\$5,675.1)	As Listed

NOTE: Totals may not sum due to rounding.

**Department of State Health Services
Selected Fiscal and Policy Issues - Senate**

1. **Texas Center for Infectious Disease.** Recommendations for 2024-25 include \$29.2 million in General Revenue/General Revenue – Dedicated Funds (\$29.9 million in All Funds) for Strategy A.2.5, Texas Center for Infectious Disease (TCID), reflecting a reduction of \$0.2 million in All Funds from 2022-23 base levels.
 - a. *General Revenue.* Recommendations include \$6.1 million in General Revenue to address to the Delivery System Reform Incentive Payment (DSRIP) program ending in fiscal year 2022 resulting in a loss of \$6.3 million in Other Funds. The Department of State Health Services (DSHS) included this request in Legislative Appropriations Request Exceptional Item #1, Maintaining Agency Operations and Infrastructure. According DSHS, the loss of this funding would impact the ability to maintain the 24/7 acute care hospital, including purchasing pharmaceuticals for patient care, medical supplies for patient and staff safety, contracted hospital and infectious disease physician services, and equipment maintenance for facility infrastructure.
 - b. *Federal Funds.* Recommendations reflect a reduction of \$2.1 million in Federal Funds for Coronavirus Relief Funds from the 2022-23 biennium. These funds were made available pursuant to Article IX, Section 14.04 (d), Disaster Related Transfer Authority, 2022-23 General Appropriations Act, with approval from the Office of the Governor. See Selected Fiscal and Policy Issue #4, COVID-19 Response, for additional details.
2. **Continue Contingent Revenue Earned in the 2022-23 Biennium.** Recommendations for 2024-25 include funding to align 2024-25 with actual contingent revenue realized in fiscal year 2022 pursuant to Rider 7, Appropriations: Contingent Revenue. These funds include \$0.3 million in General Revenue and \$5.2 million in General Revenue – Dedicated Funds. This recommendation partially funds agency’s Legislative Appropriations Request Exceptional Item #1, Maintaining Agency Operations and Infrastructure.
3. **General Revenue – Dedicated Account No. 5111, Trauma Facility and EMS.** Recommendations include \$86.4 million and \$86.1 million in General Revenue – Dedicated Account No. 5111, Trauma Facility and EMS (Account 5111) for fiscal years 2024 and 2025, respectively, in Strategy B.2.1, EMS and Trauma Care Systems. This is a reduction of \$53.1 million from 2022-23 appropriated amounts.
 - a. *Account 5111 Revenue.* According to the Department of State Health Services (DSHS), the amount of revenue collected in Account 5111 in fiscal year 2021 was \$90.1 million, which was \$24.9 million lower than appropriations. Revenue collections were likely lower due to changes in revenue streams as a result of House Bill 2048, Eighty-sixth Legislature, Regular Session, 2019; House Bill 1631, Eighty-sixth Legislature, Regular Session, 2019; and the effects of COVID-19. House Bill 2048 repealed the Driver Responsibility Program (DRP), which previously provided revenue for Account 5111, and provided replacement funding by increasing the state traffic fine, adding fines for convictions of driving while intoxicated, and raising a motor vehicle insurance fee. House Bill 1631 repealed the ability of local jurisdictions to use red light cameras, which resulted in a reduction in revenue. The new revenue provided in House Bill 2048 was meant to fully offset the revenue loss to Account 5111, but actual collections vary. COVID-19 may have also reduced revenue due to court closures and a decrease in driving, though it is not known what portion of the revenue decline is attributable to statutory changes or COVID-19. Recommendations are based on estimated revenue of \$86.0 million in Account 5111 in each fiscal year.



- b. *Account 5111 Allocations.* The passage of House Bill 2048, Eighty-Sixth Legislature, Regular Session, 2019 changed allocations of funds from Account 5111. Starting in fiscal year 2020, after setting aside an extraordinary emergencies reserve of \$0.5 million, at least 94.0 percent of the appropriated funding is also directed for use of uncompensated trauma care, 3.0 percent is for Emergency Medical Services (EMS) providers, 2.0 percent is for Regional Advisory Committees (RACs), and no more than 1.0 percent can be used for DSHS administration. However, statute still allows the account to fund provider reimbursement payments in Medicaid, and to the Higher Education Coordinating Board for graduate medical education and nursing education programs as well.

Historically, the legislature has appropriated funds from Account 5111, via interagency contract from DSHS, to the Health and Human Services Commission (HHSC) for provider reimbursement payments in Medicaid to maximize the receipt of federal funds under Medicaid as permitted by statute. These appropriations are reflected in both current Special Provisions Relating to All Health and Human Services Agencies, Section 15, Use of Trauma Fund Receipts, and HHSC’s current Rider 8, Hospital Payments, Subsection (a) for trauma care add-on payments and Subsection (b) for safety-net hospital add-on payments. Because the entire amount of Account 5111 funding is not appropriated for uncompensated trauma care, Emergency Medical Services (EMS) providers, RACs, and administration, it is not clear what amount should be used to calculate the allocations for those programs. DSHS calculates the allocations based on the full amount of Account 5111 retained at DSHS and a portion of funds transferred to HHSC. The table below shows total Account 5111 appropriations and allocations from DSHS from 2018-19 through 2024-25 recommendations. Historically anytime revenues cannot cover appropriations, the shortfall is reflected in the HHSC allocation amount.

	2018-19	2020-21	2022-23	2024-25 (Recommended)
Total Transfer to HHSC	\$203,231,550	\$200,942,948	\$197,957,174	\$144,836,819
Total Retained by DSHS	\$29,102,451	\$29,102,452	\$27,647,330	\$27,647,330
EMS Providers	\$3,622,049	\$4,961,114	\$4,827,887	\$5,144,525
RACs	\$1,811,024	\$3,307,409	\$3,218,591	\$3,429,683
Administration	\$1,811,024	\$1,653,705	\$1,609,296	\$1,714,842
Remainder at DSHS (Reserve and Uncompensated Trauma Care)	\$21,858,353	\$19,180,225	\$17,991,557	\$17,358,280
Total Account 5111 Appropriations	\$232,424,001	\$230,045,400	\$225,604,504	\$172,484,149

4. COVID-19 Response.

- a. *Overview of Public Health Related COVID-19 Federal Legislation and Funding at the Department of State Health Services (DSHS).* The State has received several streams of federal funding to help offset costs attributable to the COVID-19 pandemic. DSHS received funds through the Coronavirus Preparedness and Response Supplemental Appropriations Act (CPRSAA), the Coronavirus Aid, Relief, and Economic Security (CARES) Act, the Paycheck Protection Program and Health Care Enhancement Act (PPPHEA), the Coronavirus Response and Relief Supplemental Appropriation (CRRSA) Act, and the American Rescue Plan Act (ARPA). As of August 31, 2022, the projected expenditures for COVID-19 response total \$9,557.1 million, from state fiscal year 2020 through the end of state fiscal year 2022.

DSHS received a total of \$2,877.6 million in Epidemiology and Laboratory Capacity (ELC) supplemental COVID-19 funding. These funds can be used to detect, respond to, control, and prevent infectious diseases. DSHS received ELC awards through five federal bills: CPRSAA, \$3.4 million; CARES Act, \$39.1 million; PPPHEA, \$479.0 million; CRRSA, \$820.0 million; and ARPA, \$1,536.0 million. The agency has used these funds to develop, purchase, administer, process, and analyze COVID-19 tests, conduct surveillance, and related activities. DSHS can use these funds for agency activities and has awarded a cumulative \$636.6 million in pass-through awards to other state agencies and local entities and schools for related activities.

DSHS received a total of \$280.1 million in Immunization Cooperative Agreements supplemental COVID-19 funding. These funds can be used to assist states and communities in establishing and maintaining preventative health service programs to immunize individuals against vaccine-preventable diseases. DSHS received these awards through three federal bills: CARES Act, \$34.6 million; CRRSA, \$227.1 million; and ARPA, \$18.4 million. The agency has used these funds for vaccine distribution and administration emphasizing populations disproportionately affected by COVID-19. DSHS can use these funds for agency activities and has awarded a cumulative \$183.2 million in pass-through awards to other state agencies and local entities and schools for related activities.

The CARES Act authorized the use of Federal Emergency Management Agency (FEMA) Public Assistance grants to address certain costs associated with COVID-19, such as purchasing personal protective equipment (PPE), testing equipment, and other FEMA allowable disaster activities such as emergency staff, ambulance teams, and equipment or services requested by local entities. Public Assistance grants are reimbursements, meaning a state must apply and submit evidence that an expense qualifies under the program and the declared disaster. The Texas Division of Emergency Management (TDEM) is the state administrator of these funds and is the intermediary for agencies and local entities to apply and receive Public Assistance funding. As of November 30, 2022, DSHS has applied for \$7,779.1 million in Public Assistance reimbursements, and received \$6,287.0 million. Recipients were able to account for expenses starting January 27, 2020; Public Assistance grants are still available to states. However, while obligations from January 27, 2020, through July 1, 2022, are reimbursed at 100 percent federal share obligations starting July 2, 2022 are set at a 90/10 federal/state cost share. Agencies that have received Public Assistance reimbursements from July 2, 2022 onward are responsible for the cost share portion.

The CARES Act established the Coronavirus Relief Funds (CRF). The state received \$8.1 billion, and the funds could be used to address the immediate expenses incurred due to the pandemic in areas such as public health and public safety salaries. These funds could be applied to eligible expenses from March 1, 2020, through December 31, 2021. DSHS received \$143.2 million in CRF for salaries and benefits, and HIV program supplemental funding.

ARPA established the Coronavirus State Fiscal Recovery (CSFR) Fund. The state received \$15.8 billion directly in CSFR Funds, and funds could be used to address government services, public health and public safety salaries, and certain infrastructure projects. During the Eighty-seventh Legislature, Third Called Session, 2021, the Legislature passed Senate Bill 8, appropriating \$12.8 billion in CSFR. This included four appropriations to DSHS related programs and activities: \$2,000.0 million for COVID-19 costs incurred from March 3, 2021, through January 1, 2023; \$20.0 million for the Federally Qualified Health Center (FQHC) Incubator Program; \$16.7 million for public health infrastructure improvements in the Rio Grande Valley; and \$21.7 million for Emergency Medical Services. CSFR Funds must be obligated by December 31, 2024, and fully expended by December 31, 2026.

Additional COVID-19 awards were received by DSHS, such as Influenza Season Vaccine Preparedness, Ryan White HIV/AIDS Part B, and Hospital Preparedness Program Cooperative Agreements. However, most of these funds were received and expended in the 2020-2021 biennium. DSHS is also the administering agency for many existing public health awards and passed through funds from relating to vaccine preparedness and testing to the Texas Education Agency (TEA), institutions of higher education, local health departments, and local entities.

COVID-19 funding directed toward public health, by Federal Act (As of November 30, 2022)

Funding Source	Amount (in millions)	Major Programs Receiving Funding
CPRSAA	\$58.8	Immunization Cooperative Agreements, Epidemiology and Laboratory Capacity (ELC)
CARES Act	\$8,007.6	Public Assistance, Immunization Cooperative Agreements, Coronavirus Relief Funds, ELC
PPPHCEA	\$479.4	ELC, Hospital Preparedness
CRRSA	\$1,802.0	ELC, Immunization Cooperative Agreements, COVID-19 Health Disparities Grants
ARPA	\$3,080.0	Coronavirus State Fiscal Recovery Funds, ELC, Immunization Cooperative Agreements,
Total	\$13,427.8	

- b. *COVID-19 Response to Existing Federally Funded Programs.* Recommendations for the 2024-25 biennium reduce \$2,493.5 million COVID-19 federal funding of existing programs at the DSHS. This excludes Coronavirus Relief Funds, State Fiscal Recovery Funds, and FEMA Public Assistance Grants. See Supplemental Table 1, COVID-19 Response Recommendations for Specific Federally Supported Programs for the amounts by grant and strategy.
 - c. *COVID-19 Budget Execution.* Fiscal year 2022 recommendations reflect a budget execution order dated October 27, 2022 transferring \$100.0 million from supplemental appropriations made in Senate Bill 8, Eighty-Seventh Legislature, Third Called Session, 2021 to the Texas Division of Emergency Management to fund remaining COVID-19 response expenses.
5. **One-Time Funding.** Recommendations reflect a reduction of \$200.4 million in General Revenue and General Revenue – Dedicated Funds from one-time funding in 2022-23 and removed in 2024-25, including:
- \$200.0 million for a transfer from the Health and Human Services Commission for COVID-19 response, and
 - \$0.4 million for start-up costs for the customer service efficiency capital project.
6. **FTEs.**
- a. *2024-25 FTE Cap.* Recommendations for FTEs in 2024-25 start from 2023 appropriated FTEs with an adjustment for authorized increases pursuant to current Rider 27, Hemp Regulation. The final calculations and recommendation caps for 2024-25 are shown in the following table.

		Fiscal Year 2022	Fiscal Year 2023
2022-23 General Appropriations Act, Appropriated FTEs		3,365.6	3,301.3
Approved Adjustments	COVID-19 Response, Letter September 30, 2021	422.0	410.0
	COVID-19 Response, Letter November 19, 2021	172.0	185.8
	Rider 27, Hemp Regulation	3.4	3.4
Adjusted FTE Cap		3,963.0	3,900.5
2024-25 Starting FTE Amount Based on Adjusted 2023		3,900.5	3,900.5
FTE Adjustments	COVID-19 Response FTEs	(595.8)	(595.8)
Recommended 2024-25 FTE cap		3,304.7	3,304.7

- b. *Staffing Shortages.* According to DSHS, the agency is experiencing staffing shortages and retention issues across multiple programs, including laboratory services, vital statistics, and radiation control. Across the programs specifically identified by the agency, the average annual vacancy rate is 14.0% for fiscal year 2022, with the largest vacancies occurring in Strategy A.1.2, Vital Statistics at 24.0%. The agency reports that the average annual vacancy rate across all programs for fiscal year 2022 is 14.1%.

Recommendations reflect an increase of \$35.7 million in All Funds and \$23.3 million General Revenue funds for the 2024-25 biennium to address statewide salary adjustments.

7. Capital Budget.

- a. *Capital Authority.* Notwithstanding the limitations of Article IX, Section 14.03, Transfers – Capital Budget, the Department of State Health Services (DSHS) is authorized to transfer from a non-capital budget item to an existing capital budget item or new capital budget item not in the agency’s bill pattern if implementation of a new project or expansion of an existing project is 100 percent federally funded and after submitting notification to the State Auditor’s Office, Comptroller of Public Accounts, Legislative Budget Board, and the Governor.
- b. *Continuing Projects.* DSHS is requesting the continuation of certain projects that were started in the 2022-23 biennium. The table below shows the recommended 2024-25 biennial General Revenue, and All Funds amounts by project.

Capital Project Name	General Revenue/General Revenue - Dedicated (In Millions)	All Funds (In Millions)
VSS Repair and Renovation	\$0.0	\$1.0
Enhance Registries - THISIS	\$0.0	\$4.2
IT Accessibility	\$2.2	\$2.2
Seat Management	\$3.1	\$5.5
Texas STHARRS Enhancements	\$0.0	\$3.2
TXEVER Order Fulfillment Enhancements	\$0.0	\$3.0
ImmTrac2 Modernization	\$0.0	\$6.4
Miscellaneous Lab Equipment	\$0.0	\$3.8
Data Center Consolidation	\$59.7	\$68.7
Cybersecurity	\$1.7	\$1.7
IT Security	\$2.4	\$2.4
Total	\$69.1	\$102.1

8. **Vital Statistics.** Recommendations for the 2024-25 biennium include \$10.9 million in General Revenue-Dedicated Funds (\$41.7 million in All Funds) in Strategy A.1.2, Vital Statistics, which represents a net decrease of \$8.5 million in All Funds below the 2022-23 biennium.
- Revenue Distribution.* Revenue collected by DSHS Vital Statistics fees includes both General Revenue-Dedicated Account No. 19, Vital Statistics (Account 19), and Appropriated Receipts. For vital records other than death certificates ordered online, the revenue is split between a program fee that is deposited to Account 19 and appropriated to DSHS as General Revenue-Dedicated funds and a Texas.gov fee, which is not appropriated to DSHS but directly transferred to the Department of Information Resources (DIR). For death certificates ordered online, the revenue is divided between the program fee, the Texas.gov fee, and a convenience fee available for use by DSHS as Appropriated Receipts (Other Funds). For all records ordered offline, revenue is split between the program fee and the convenience fee. The revenue splits are determined in the final contract agreement between DSHS and DIR.
 - Recommended Funding and FTEs.* Recommendations include 199.6 FTEs in each fiscal year in the 2024-25 biennium. Funding recommendations reflect a \$4.8 million decrease in Federal Funds for COVID-19 Public Health Emergency Response (see Selected Fiscal and Policy Issues Supplemental Table 1).
9. **Immunizations.** Recommendations include \$60.3 million in General Revenue/General Revenue – Dedicated Funds (\$179.2 million in All Funds) for Strategy A.2.1, Immunize Children and Adults in Texas. This recommendation is an increase of \$2.4 million in General Revenue, but an All Funds reduction of \$378.0 million compared to the 2022-23 biennium.
- Federal Immunization Grants.* Recommendations include a reduction of \$372.3 million in the federal Immunization Cooperative Agreement award through the Coronavirus Aid, Relief, and Economic Security (CARES) Act to support influenza vaccine and COVID-19 vaccine preparedness. Additional recommendations reduce the federal Immunization Cooperative Agreement unrelated to COVID-19 response by \$5.6 million.
 - Additional Recommendations.* Recommendations include a reduction of Coronavirus Relief Funds (CRF) by \$2.3 million, and an increase of \$2.3 million in General Revenue related to the Method of Finance swap with the Office of the Governor. Recommendations maintain this funding in the 2024-25 base.
10. **HIV/STD Prevention.** Recommendations for Strategy A.2.2, HIV/STD Prevention include \$131.4 million in General Revenue (\$507.2 million in All Funds), which is a decrease of \$34.7 million All Funds from the 2022-23 biennium.
- HIV Vendor Drug Rebates.* Recommendations reflect an increase of \$6.9 million in the HIV Vendor Drug Rebates Account No. 8149 (Other Funds) from the 2022-23 biennium. The Department of State Health Services (DSHS) earns drug manufacturer rebates on medication co-payments it makes in the State Pharmaceutical Assistance Program (SPAP) and the Texas Insurance Assistance Program (TIAP), which are both part of its HIV Medication program. According the DSHS, collections have been decreasing over time. However, the agency reports unexpended balance to transfer across biennium pursuant to current agency Rider 19, HIV Vendor Drug Rebates. DSHS requested an unexpended balance transfer of \$8.0 million into 2024 from prior fiscal years. Excluding this transfer, appropriations from this fund in 2024-25 are maintained at \$19.7 million per fiscal year.
 - HIV Care Formula Grants.* DSHS receives Ryan White Part B HIV Care Formula Grants from the Health Resources and Services Administration (HRSA) to improve the quality, availability, and organization of HIV health care and support services in the state. There are two parts to the grant: a formula-driven base, and a formula-driven increase for AIDS Drug Assistance Program (ADAP) amount. From federal fiscal year 2019 to 2022, DSHS is reporting an increase in the total grant, and in both the base and the ADAP portion. However, DSHS is reporting a decrease in the total grant starting in federal fiscal year 2023 and maintain this reduced amount through federal fiscal year 2026.

The formula grant for both the base and ADAP portion require DSHS to meet a Maintenance of Effort (MOE) and state match requirement. HRSA does allow state match to meet the MOE and match requirements. The state match requirement for DSHS is one state dollar for every two federal dollars, and the MOE requires the state maintain HIV-related expenditures at a level equal to the previous year. The consequence of not meeting MOE requirements is not discussed in HRSA guidance, but it could result in a significant loss of federal funds. DSHS not meeting state match requirements would cause a decrease in the award to the amount that could be matched. To meet the requirements, DSHS counts General Revenue for HIV Services Account No. 8005 and HIV-related expenditures made by the Texas Department of Criminal Justice (TDCJ). HRSA allows DSHS to use up to \$1.0 million in HIV-related expenditures to meet MOE requirements after DSHS requested a change in MOE methodology.

Recommendations for the 2024-25 biennium include a reduction of \$14.6 million in HIV Care Formula Grants from the 2022-23 biennium to align with DSHS' projections. Recommendations include maintaining funds for General Revenue for HIV Services Account No. 8005. This will ensure MOE and state match is met for federal fiscal years 2024 and 2025.

- c. *Other Federal HIV and STD Grants.* Recommendations reflect an increase of \$0.3 million in federal funding for the Housing Opportunities for Persons with AIDS in 2024-25. DSHS is reporting that it will fully expend remaining federal funding balances from federal fiscal year 2021 through 2023 in state fiscal year 2023. This puts the agency expending the full federal fiscal year 2024 funds in state fiscal year 2024. The federal funding for this program does not have a state match or MOE requirement.

Recommendations include a \$2.7 million reduction to the HIV Prevention grant in Strategy A.2.2, HIV/STD Prevention based on DSHS projections primarily related to a decrease of \$2.6 million in the Category A, HIV Prevention Core subgrant. The subgrant is to be used for projects that show potential to reduce new HIV infections: HIV testing; comprehensive prevention with HIV+ individuals; condom distribution and policy initiatives that enable optimal HIV prevention, care, and treatment. Recommendations reflect a reduction of \$0.2 million from the 2022-23 biennium to the 2024-25 biennium subgrant for the National HIV Behavioral Surveillance with DSHS reporting the last grant was funded in federal fiscal year 2021 and ended in December 2021. The grant funded a 15+ yearlong cross-sectional survey for high-risk groups. This grant series does not have a state match or MOE requirement to be maintained.

Recommendations for 2024-25 biennium, from the 2022-23 biennium, reflect a decrease of \$9.8 million in STD Control and Morbidity and Risk Behavior Surveillance on HIV and AIDS grants, which \$9.3 million is related to COVID-19 response funding. Each of the two grants do not require a state match or MOE to be met.

11. **Laboratory Services.**

- a. *Recommendations of FTEs and Funding.* Recommendations include \$43.4 million in General Revenue/General Revenue – Dedicated Funds and \$132.4 million in All Funds in Strategy A.4.1, Laboratory Services for 2024-25, which is a \$4.7 million increase in General Revenue/General Revenue – Dedicated Funds from the 2022-23 biennium. However, the All Funds recommendation is a decrease of \$3.4 million primarily due to the reduction in Coronavirus Relief Funds and Coronavirus State Fiscal Recovery Funds.
- b. *Public Health Medicaid Reimbursements Account No. 709.* The Department of State Health Services (DSHS) is appropriated collected revenue from the Public Health Medicaid Reimbursements Account No. 709 (Account 709); Special Provisions Relating to All Health and Human Services Agencies, Section 14, Limitation: Expenditure and Transfer of Public Health Medicaid Reimbursements, transfers a portion of these revenues to the Health and Human Services Commission (HHSC) to fund Medicaid – Non-Full Benefit Payments and the Mental Health State Hospitals. Recommendations also include amending the Special Provisions Relation to All Health and Human Services Agencies for the 2024-25 biennium by removing Section (a)(2)(b) from Section 14. Limitation: Expenditure and Transfer of Public Health Medicaid Reimbursements and place funds allocated to HHSC in Strategy A.4.1, Laboratory Services as Medicaid typical requires supplemental appropriations. The recommended funding to HHSC under new recommendation (a)(2)(a) is an estimated \$69.2 million.

DSHS may increase its appropriations after a Finding of Fact is issued by the Comptroller of Public Accounts (CPA) confirming the agency's projections for any anticipated increases in revenue for additional screens added to the federal Recommended Uniform Screening Panel.

- c. *Newborn Preservation Screening Account.* When DSHS receives additional revenue over appropriations, up to \$12.0 million, in Account 709 the revenue can be deposited into the Newborn Preservation Screening Account pursuant to Health and Safety Code, Section 33.052. Collections over \$12.0 million in a fiscal year may be requested by the agency from the Legislative Budget Board and the Governor.

12. **Border Security.** The Department of State Health Services (DSHS) received \$16.4 million in General Revenue supplemental appropriations from House Bill 9, Eighty-seventh Legislature, Second Called Session, 2021, for ambulance services for border security. \$5.5 million was appropriated for general ambulance services, and \$10.9 million for ambulance services at the border processing centers. Recommendations in 2024-25 maintain the \$16.4 million in Strategy A.1.1, Public Health Preparedness and Coordinated Services from the 2022-23 biennium.
13. **Senate Bill 8, Eighty-Seventh Legislature, Third Called Session, 2021.** The Department of State Health Services (DSHS) was appropriated \$2,058.4 million in Coronavirus State Fiscal Recovery Funds for the following needs:
- \$2,000.0 million for surge staffing, therapeutic drugs and monoclonal antibody treatments for COVID-19, and operation of regional infusion centers;

- \$16.7 million to upgrade existing laboratory facilities in Hidalgo County and new laboratory infrastructure in Starr County;
 - \$20.0 million for the Federally Qualified Health Center (FQHC) Incubator Program; and
 - \$21.7 million to provide funding for Emergency Medical Services (EMS) staffing, Emergency Medical Technicians (EMTs), and paramedics staffing including workforce development initiatives with priority to rural underserving areas.
14. **Maternal Mortality and Morbidity Reporting.** The Department of State Health Services (DSHS), pursuant to Chapter 34 of Health and Safety Code, works with the Texas Maternal Mortality and Morbidity Review Committee to publish the Maternal Mortality and Morbidity Review report on September 1 of every even-numbered year. DSHS submitted the report on December 15, 2022 with recommendations and findings with over 83 percent of the provisional cases reviewed. The Department reports that they will issue an update once all cases are reviewed, but that findings for the remaining cases appear to mirror the trend reported.
15. **Transfer from the Cancer Prevention Research Institute of Texas (CPRIT).** Recommendations maintain a transfer of \$3.1 million each fiscal year out of General Obligation Bond Proceeds for the Cancer Registry from CPRIT. These funds are already shown at CPRIT in General Bond Obligations Account No. 758 but are in the Department of State Health Services Method of Finance table as Interagency Contracts. Recommendations add transparent language to Rider 23, Transfer from the Cancer Prevention and Research Institute of Texas for the Cancer Registry, for the estimated fringe benefits totaling an estimated \$0.4 million per fiscal year.

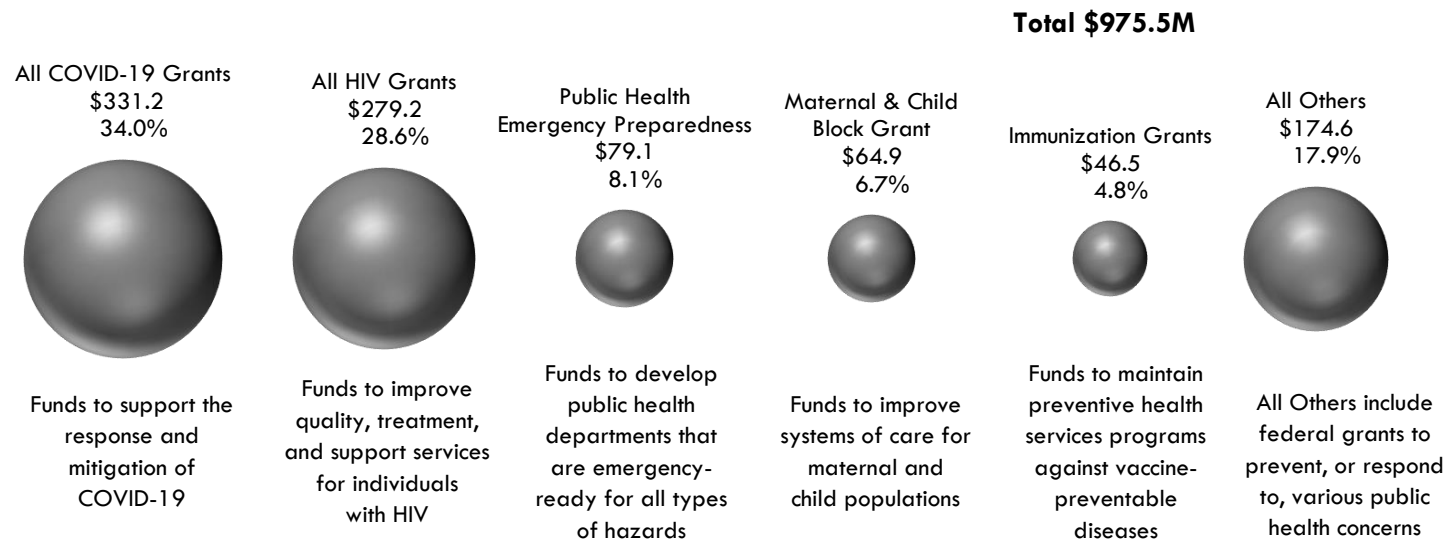
**Department of State Health Services
Selected Fiscal and Policy Issues, Supplemental Table 1: COVID-19 Response Recommendations for Specific Federally Supported Programs**

Non-CRF/CSFR COVID-19 Grant	Strategy Impacted	2022-23 (In Millions)	2024-25 (Recommendations in Millions)	Adjustment from Base
93.354.119, COVID19 Public Health Emergency Response	A.1.1	\$147.6	\$15.0	(\$132.6)
	A.1.2	\$4.8	\$0.0	(\$4.8)
	D.1.1	\$0.1	\$0.0	(\$0.1)
	E.1.1	\$1.1	\$0.6	(\$0.5)
93.354.119, COVID19 Public Health Emergency Response Total		\$153.5	\$15.5	(\$138.0)
93.967.119, Placeholder Public Health Infrastructure	A.1.1	\$19.2	\$48.2	\$29.0
93.967.119, Placeholder Public Health Infrastructure Total		\$19.2	\$48.2	\$29.0
93.240.119, COVID 19 State Capacity Building and 93.262.119, COVID Worker Safety and Health	A.1.3	\$0.1	\$0.0	(\$0.1)
93.240.119, COVID 19 State Capacity Building and 93.262.119, COVID Worker Safety and Health Total		\$0.1	\$0.0	(\$0.1)
93.336.119, COVID Behavioral Risk Factor Surveillance System and 93.391.119, COVID Support State Health Dept Response to PH Crisis	A.1.5	\$35.6	\$0.0	(\$35.6)
	E.1.1	\$0.3	\$0.0	(\$0.3)
93.336.119, COVID Behavioral Risk Factor Surveillance System and 93.391.119, COVID Support State Health Dept Response to PH Crisis Total		\$35.9	\$0.0	(\$35.9)
93.268.119, Immunization Cooperative Agreements	A.2.1	\$388.4	\$16.1	(\$372.3)
	D.1.1	\$0.4	\$0.0	(\$0.4)
	E.1.1	\$2.6	\$0.4	(\$2.2)
93.268.119, Immunization Cooperative Agreements Total		\$391.4	\$16.5	(\$374.9)
93.917.119, COVID19 HIV Care Formula Grants	A.2.2	\$0.1	\$0.0	(\$0.1)
93.917.119, COVID19 HIV Care Formula Grants Total		\$0.1	\$0.0	(\$0.1)
93.977.119, COVID19 Preventive Health Services STD Control Grants	A.2.2	\$42.1	\$32.8	(\$9.3)
	E.1.1	\$0.3	\$2.7	\$2.3
93.977.119, COVID19 Preventive Health Services STD Control Grants Total		\$42.5	\$35.5	(\$7.0)

Non-CRF/CSFR COVID-19 Grant	Strategy Impacted	2022-23 (in Millions)	2024-25 (Recommendations in Millions)	Adjustment from Base
93.323.119, COVID19 Epidemiology and Lab Capacity for Infectious Diseases (ELC)	A.2.3	\$2,147.2	\$203.6	(\$1,943.6)
	D.1.1	\$20.0	\$5.5	(\$14.5)
	E.1.1	\$14.0	\$5.8	(\$8.2)
93.323.119, COVID19 Epidemiology and Lab Capacity for Infectious Diseases (ELC) Total		\$2,181.2	\$214.8	(\$1,966.3)
93.103.119, COV19 Food & Drug Administration Research	A.4.1	\$0.1	\$0.0	(\$0.1)
93.103.119, COV19 Food & Drug Administration Research Total		\$0.1	\$0.0	(\$0.1)
Grand Total		\$2,824.0	\$330.6	(\$2,493.4)

Department of State Health Services

Summary of Federal Funds (2024-25)

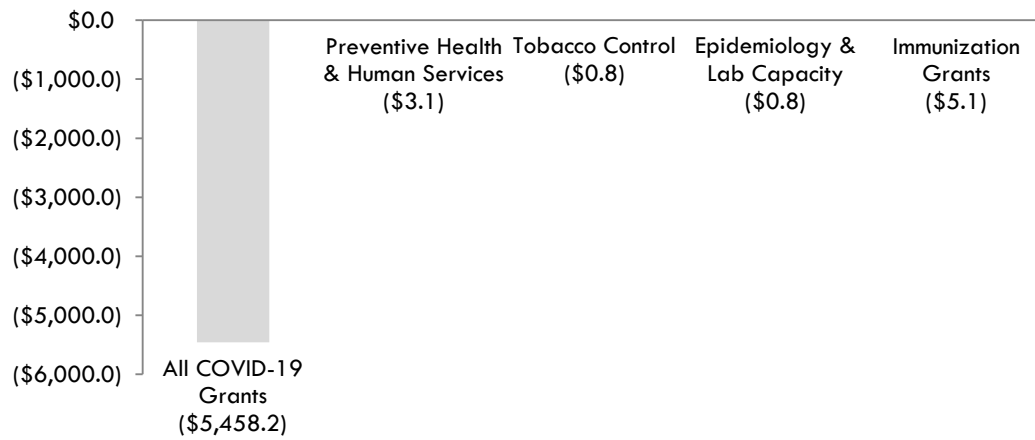


Selected Federal Fiscal and Policy Issues

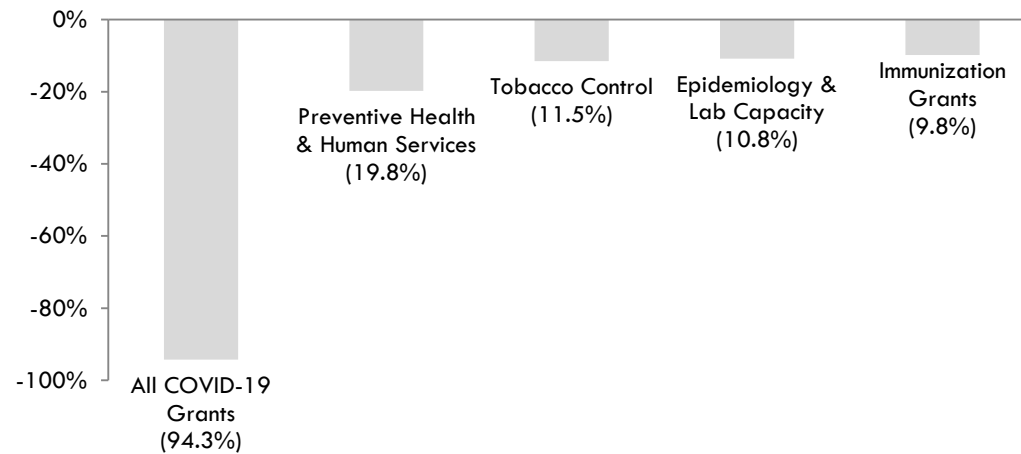
Federal Funds estimates for the 2024-25 biennium include a net decrease of \$5.5 billion. This is attributable to a decrease of \$5.5 billion in one-time COVID-19 awards, as well as a \$20.3 million cumulative decrease for non-COVID-19 awards. The reduction in non-COVID-19 awards reflects estimated awards for project and formula grants.

Programs with Significant Federal Funding Changes from 2022-23

Program Change-by Amount (In Millions)



Program Change-by Percentage



**Department of State Health Services
Rider Highlights - Senate**

Modification of Existing Riders

7. **Appropriation: Contingent Revenue.** Recommendations delete the last paragraph related to collections over the Biennial Revenue Estimate for Account No. 524, Public Health Services Fee. Language was one-time and no longer needed as appropriations have been adjusted to reflect 2024-25 revenue projections.
11. **Reimbursement of Advisory Committee Members.** Recommendations include the addition of three new committees, State Preventative Health Advisory Committee, Sickle Cell Task Force, and the Newborn Screening Advisory Committee to the list of reimbursable committee members.
20. **Contingency for Behavioral Health Funds.** Recommendations add strategies A.1.1, Public Health Preparedness and Coordinated Services and A.1.5, Health Data and Statistics, to the rider to reflect all strategies with behavioral health appropriations.
23. **Transfer from the Cancer Prevention and Research Institute of Texas for the Cancer Registry.** Recommendations add language for transparency regarding the estimated fringe benefits that are assumed in the appropriation.

The following riders include recommendations to remove obsolete language and make conforming changes such as updating fiscal years and amounts to reflect funding recommendations: Rider 2, Capital Budget; Rider 3, Appropriations Limited to Revenue Collections; Rider 5, Texas.Gov Authority Appropriation; Rider 8, Estimated Appropriations: Perpetual Care Account; Rider 9, Limitation: Transfer Authority; Rider 18, HIV Vendor Drug Rebates; Rider 19, Permanent Hospital Fund; Rider 27, Federal Funds Reporting Requirement; Rider 30, Report on Federal Public Health Funding to Local Health Entities; and Rider 31, Unexpended Balance Authority: Texas Center for Nursing Workforce Studies Funding.

New Riders

None.

Deleted Riders

8. **Cardiovascular Disease.** Recommendations delete rider as the agency no longer performs data collection activities allowed in the rider.
27. **Hemp Regulation.** Recommendations delete rider as funding is assumed in the base.
33. **Report on COVID-19 Immunization Distribution Equity.** Recommendations delete the one-time reporting requirement.
36. **Contingency Rider for Senate Bill 968.** Recommendations delete contingency rider for legislation that passed.
37. **Contingency Rider for Senate Bill 969.** Recommendations delete contingency rider for legislation that passed.
38. **Contingency Rider for Senate Bill 984.** Recommendations delete contingency rider for legislation that passed.
39. **Border Security.** Recommendations delete the informational rider for supplemental funding appropriated pursuant to House Bill 9, Eighty-Seventh Legislature, Second Called Session related to border security.

**Department of State Health Services
Items Not Included in Recommendations - Senate**

	2024-25 Biennial Total			Information Technology Involved?	Contracting Involved?	Estimated Continued Cost 2026-27
	GR & GR-D	All Funds	FTEs			

Agency Exceptional Items Not Included (in agency priority order)

1)	Maintaining Agency Operational Infrastructure	\$12,732,789	\$12,732,789	4.0	Yes	Yes	\$9,634,761
2)	Driving Public Health Response through Technological Tools	\$17,550,254	\$30,196,436	57.0	Yes	Yes	\$30,272,590
3)	Ensuring Access to Frontline Public Health Services	\$42,459,622	\$42,459,622	23.0	Yes	Yes	\$38,111,222
4)	Reducing the Impact of Preventable Disease	\$20,056,282	\$20,056,282	1.0	No	Yes	\$20,057,308
5)	Supporting Businesses and Economic Needs	\$2,658,673	\$2,658,673	11.0	No	No	\$3,016,698
6)	Strengthening Readiness for Public Health Emergency Response	\$14,168,232	\$14,868,204	3.0	Yes	Yes	\$14,868,012
7)	State Trauma System Coordination	\$6,600,000	\$6,600,000	0.0	No	Yes	\$6,600,000
8)	Improve Maternal Health Data Available	\$2,637,745	\$2,637,745	14.0	No	No	\$2,760,230
9)	HIV New Federal Policies	\$57,744,728	\$57,744,728	5.0	No	Yes	\$60,049,506

Agency Rider Requests Not Included

1)	Federal Funds Reporting Requirement. Request to delete rider. Recommendations retain the rider.	\$0	\$0	0.0	No	Yes	\$0
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TOTAL Items Not Included in Recommendations	\$176,608,325	\$189,954,479	118.0		\$185,370,327
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**Department of State Health Services
Appendices - Senate**

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**Department of State Health Services
Funding Changes and Recommendations by Strategy - Senate**

Strategy/Fund Type/Goal	2022-23 Base	2024-25 Recommended	Biennial Change	% Change	Comments
PUBLIC HEALTH PREP. & COORD. SVCS A.1.1	\$3,409,510,402	\$227,278,338	(\$3,182,232,064)	(93.3%)	
GENERAL REVENUE FUNDS	\$249,047,767	\$49,865,808	(\$199,181,959)	(80.0%)	Recommendations reflect: a decrease of \$200.0 million in General Revenue related to a one-time transfer from Health and Human Services Commission for COVID-19 response (See Selected Fiscal and Policy Issue #4 and 5); and an increase of \$0.8 million in General Revenue to reflect a MOF swap and maintain funding at the amount appropriated for Coronavirus Relief Funds in fiscal year 2022 (See Selected Fiscal and Policy #4).
GR DEDICATED	\$0	\$0	\$0	0.0%	
FEDERAL FUNDS	\$3,160,315,866	\$177,377,854	(\$2,982,938,012)	(94.4%)	Recommendations reflect: a decrease of \$2,977.9 million in COVID-19 response consortia grants (See Selected Fiscal and Policy Issue #4); a decrease of \$1.7 million in federal funding for general, ebola, and national bioterrorism preparedness; and a decrease of \$3.3 million in CFDA 93.991.000, Preventive Health and Health Services Block Grant.
OTHER FUNDS	\$146,769	\$34,676	(\$112,093)	(76.4%)	
VITAL STATISTICS A.1.2	\$50,177,438	\$41,678,661	(\$8,498,777)	(16.9%)	
GENERAL REVENUE FUNDS	\$0	\$0	\$0	0.0%	
GR DEDICATED	\$10,869,287	\$10,869,287	\$0	0.0%	Recommendations reflect maintaining the increased collections. (See Selected Fiscal and Policy Issue #2)
FEDERAL FUNDS	\$4,823,901	\$0	(\$4,823,901)	(100.0%)	Recommendations reflect a decrease of \$4.8 million provided in 2022-23 for COVID-19 response (See Selected Fiscal and Policy Issue #4), and \$0.04 million in other grant funding.
OTHER FUNDS	\$34,484,250	\$30,809,374	(\$3,674,876)	(10.7%)	Recommendations reflect a \$3.9 million decrease in Appropriated Receipts and a \$0.2 million increase in Interagency Contracts.
HEALTH REGISTRIES A.1.3	\$33,451,979	\$35,048,995	\$1,597,016	4.8%	
GENERAL REVENUE FUNDS	\$8,158,659	\$8,417,973	\$259,314	3.2%	Recommendations reflect a MOF swap of \$0.3 million with Coronavirus Relief Funds in fiscal year 2022. (See Selected Fiscal and Policy Issue #4)
GR DEDICATED	\$0	\$0	\$0	0.0%	

**Department of State Health Services
Funding Changes and Recommendations by Strategy - Senate**

Strategy/Fund Type/Goal	2022-23 Base	2024-25 Recommended	Biennial Change	% Change	Comments
FEDERAL FUNDS	\$16,051,424	\$17,202,820	\$1,151,396	7.2%	Recommendations include an increase \$1.5 million in the Maternal and Child Health Services Block Grant; an increase of \$0.2 million in Cancer Prevention and Control; a decrease of \$0.4 million in COVID-19 response funding (See Selected Fiscal and Policy Issue #4); and a decrease of \$0.2 million in other grant funding for occupational safety, birth defect prevention and surveillance, and environmental public health.
OTHER FUNDS	\$9,241,896	\$9,428,202	\$186,306	2.0%	Recommendations reflect an increase of \$0.2 million Appropriated Receipts and Interagency Contracts to maintain the Rider 24, Transfer from the Cancer Prevention and Research Institute of Texas for the Cancer Registry amount. (See Selected Fiscal and Policy Issue #15).
BORDER HEALTH AND COLONIAS A.1.4	\$4,770,137	\$4,665,464	(\$104,673)	(2.2%)	
GENERAL REVENUE FUNDS	\$2,252,369	\$2,401,106	\$148,737	6.6%	Recommendations reflect a MOF swap of \$0.1 million with Coronavirus Relief Funds in fiscal year 2022. (See Selected Fiscal and Policy Issue #4)
GR DEDICATED	\$0	\$0	\$0	0.0%	
FEDERAL FUNDS	\$1,984,936	\$1,714,358	(\$270,578)	(13.6%)	Recommendations reflect a decrease of \$0.1 million as a MOF swap with Coronavirus Relief Funds for General Revenue and a \$0.1 million decrease in the State administrative funding for Supplemental Nutrition Assistance Program (SNAP).
OTHER FUNDS	\$532,832	\$550,000	\$17,168	3.2%	Recommendations reflect an increase in Interagency Contracts to maintain fiscal year 2023 budgeted amounts.
HEALTH DATA AND STATISTICS A.1.5	\$46,856,383	\$11,385,784	(\$35,470,599)	(75.7%)	
GENERAL REVENUE FUNDS	\$3,896,621	\$4,017,858	\$121,237	3.1%	Recommendations reflect a MOF swap of \$0.1 million with Coronavirus Relief Funds in fiscal year 2022. (See Selected Fiscal and Policy Issue #4)
GR DEDICATED	\$2,297,355	\$2,318,426	\$21,071	0.9%	Recommendations reflect a MOF swap of \$0.02 million with Coronavirus Relief Funds in fiscal year 2022. (See Selected Fiscal and Policy Issue #4)

**Department of State Health Services
Funding Changes and Recommendations by Strategy - Senate**

Strategy/Fund Type/Goal	2022-23 Base	2024-25 Recommended	Biennial Change	% Change	Comments
FEDERAL FUNDS	\$37,647,061	\$1,842,000	(\$35,805,061)	(95.1%)	Recommendations reflect a decrease of \$35.7 million in COVID-19 federal funding (See Selected Fiscal and Policy Issue #4); an increase of \$0.1 million in federal funding for opioid response; and a decrease of \$0.1 million in other grants related to behavioral risk factor surveillance and adolescent health practices.
OTHER FUNDS	\$3,015,346	\$3,207,500	\$192,154	6.4%	Recommendations increase \$0.2 million for Appropriated Receipts and Interagency Contracts.
IMMUNIZE CHILDREN & ADULTS IN TEXAS A.2.1	\$557,158,185	\$179,187,528	(\$377,970,657)	(67.8%)	
GENERAL REVENUE FUNDS	\$51,274,077	\$53,622,844	\$2,348,767	4.6%	Recommendations reflect a MOF swap of \$2.4 million with Coronavirus Relief Funds in fiscal year 2022. (See Selected Fiscal and Policy Issue #4)
GR DEDICATED	\$6,675,554	\$6,675,554	\$0	0.0%	
FEDERAL FUNDS	\$440,462,858	\$60,143,434	(\$380,319,424)	(86.3%)	Recommendations reflect: a decrease of \$378.0 million in COVID-19 and standard federal funding related to immunization grants; and \$2.4 million for a MOF swap with General Revenue to maintain base amounts. (See Selected Fiscal and Policy Issue #4 and 9)
OTHER FUNDS	\$58,745,696	\$58,745,696	\$0	0.0%	
HIV/STD PREVENTION A.2.2	\$541,925,612	\$507,214,232	(\$34,711,380)	(6.4%)	
GENERAL REVENUE FUNDS	\$131,381,103	\$131,381,103	\$0	0.0%	
GR DEDICATED	\$0	\$0	\$0	0.0%	
FEDERAL FUNDS	\$370,043,697	\$328,403,276	(\$41,640,421)	(11.3%)	Recommendations include: an increase of \$0.3 million in federal funding for housing opportunities for persons with AIDS; a decrease of \$14.6 million in federal funding for the HIV Care Formula Grants; a decrease of \$14.8 million in federal funding for preventative health services related to STD control; a decrease of \$2.7 million in federal funding for HIV Prevention programs; and a decrease of \$0.5 million in federal funding for other grants related to morbidity surveillance and viral hepatitis prevention and control (See Selected Fiscal and Policy Issue #10).

**Department of State Health Services
Funding Changes and Recommendations by Strategy - Senate**

Strategy/Fund Type/Goal	2022-23 Base	2024-25 Recommended	Biennial Change	% Change	Comments
OTHER FUNDS	\$40,500,812	\$47,429,853	\$6,929,041	17.1%	Recommendations reflect an anticipated unexpended balance transfer pursuant to Rider 19, HIV Vendor Drug Rebates. (See Selected Fiscal and Policy Issue #10)
INFECTIOUS DISEASE PREV/EPI/SURV A.2.3	\$2,176,697,961	\$232,228,353	(\$1,944,469,608)	(89.3%)	
GENERAL REVENUE FUNDS	\$19,987,719	\$20,677,832	\$690,113	3.5%	Recommendations reflect a MOF swap of \$0.7 million with Coronavirus Relief Funds in fiscal year 2022. (See Selected Fiscal and Policy Issue #4)
GR DEDICATED	\$0	\$0	\$0	0.0%	
FEDERAL FUNDS	\$2,155,096,588	\$209,936,867	(\$1,945,159,721)	(90.3%)	Recommendations decrease federal funding by \$1,945.2 million for COVID-19 response and standard state awards for Epidemiology and Lab Capacity for Infectious Diseases. (See Selected Fiscal and Policy Issue #4)
OTHER FUNDS	\$1,613,654	\$1,613,654	\$0	0.0%	
TB SURVEILLANCE & PREVENTION A.2.4	\$67,487,733	\$64,426,628	(\$3,061,105)	(4.5%)	
GENERAL REVENUE FUNDS	\$48,394,287	\$49,918,692	\$1,524,405	3.1%	Recommendations reflect a MOF swap of \$1.5 million with Coronavirus Relief Funds in fiscal year 2022. (See Selected Fiscal and Policy Issue #4)
GR DEDICATED	\$0	\$0	\$0	0.0%	
FEDERAL FUNDS	\$16,233,850	\$13,977,674	(\$2,256,176)	(13.9%)	Recommendations reduce \$1.5 million in federal funding for Coronavirus Relief Fund as a MOF swap with General Revenue. Additionally included is a \$0.7 million decrease in funding for tuberculosis control.
OTHER FUNDS	\$2,859,596	\$530,262	(\$2,329,334)	(81.5%)	Recommendations reflect a decrease of \$2.3 million in Appropriated Receipts.
TX CENTER FOR INFECTIOUS DISEASE A.2.5	\$30,113,839	\$29,933,948	(\$179,891)	(0.6%)	
GENERAL REVENUE FUNDS	\$19,203,403	\$27,455,728	\$8,252,325	43.0%	Recommendations reflect: an increase of \$6.1 million in General Revenue for the loss of Delivery System Reform Incentive Payment (DSRIP) funding as a result of the program ending in fiscal year 2022 (See Selected Fiscal and Policy Issue #1); and an increase of \$2.1 million to reflect a MOF swap in fiscal year 2022 with Coronavirus Relief Funds (See Selected Fiscal and Policy Issue #4).

**Department of State Health Services
Funding Changes and Recommendations by Strategy - Senate**

Strategy/Fund Type/Goal	2022-23 Base	2024-25 Recommended	Biennial Change	% Change	Comments
GR DEDICATED	\$1,766,000	\$1,766,000	\$0	0.0%	
FEDERAL FUNDS	\$2,140,325	\$0	(\$2,140,325)	(100.0%)	Recommendations reflect a decrease of \$2.1 million in federal funding for Coronavirus Relief Funds. (See Selected Fiscal and Policy Issue #4)
OTHER FUNDS	\$7,004,111	\$712,220	(\$6,291,891)	(89.8%)	Recommendations decrease Appropriated Receipts by \$6.3 million.
CHRONIC DISEASE PREVENTION A.3.1	\$28,147,367	\$27,900,048	(\$247,319)	(0.9%)	
GENERAL REVENUE FUNDS	\$7,655,897	\$7,663,076	\$7,179	0.1%	Recommendations reflect a MOF swap with Coronavirus Relief Funds in fiscal year 2022. (See Selected Fiscal and Policy Issue #4)
GR DEDICATED	\$0	\$0	\$0	0.0%	
FEDERAL FUNDS	\$20,479,470	\$20,224,972	(\$254,498)	(1.2%)	Recommendations include a MOF swap of less than \$0.1 million in Coronavirus Relief Funds in fiscal year 2022. Additionally reflected in recommendations is a \$0.3 million decrease in the Texas Physical Activity and Nutrition Program grant.
OTHER FUNDS	\$12,000	\$12,000	\$0	0.0%	
REDUCE USE OF TOBACCO PRODUCTS A.3.2	\$14,726,455	\$13,930,634	(\$795,821)	(5.4%)	
GENERAL REVENUE FUNDS	\$7,964,332	\$7,964,332	\$0	0.0%	
GR DEDICATED	\$0	\$0	\$0	0.0%	
FEDERAL FUNDS	\$6,762,123	\$5,966,302	(\$795,821)	(11.8%)	Recommendations reflect a decrease in federal funding for the National and State Tobacco Control program grant.
OTHER FUNDS	\$0	\$0	\$0	0.0%	
LABORATORY SERVICES A.4.1	\$135,730,971	\$132,372,658	(\$3,358,313)	(2.5%)	
GENERAL REVENUE FUNDS	\$3,751,664	\$3,751,664	\$0	0.0%	
GR DEDICATED	\$34,947,625	\$39,648,336	\$4,700,711	13.5%	Recommendations reflect a MOF swap with Coronavirus Relief Funds in fiscal year 2022. (See Selected Fiscal and Policy Issue #4)
FEDERAL FUNDS	\$22,577,863	\$649,346	(\$21,928,517)	(97.1%)	
OTHER FUNDS	\$74,453,819	\$88,323,312	\$13,869,493	18.6%	Recommendations include an increase of \$13.9 million in Public Health Medicaid Reimbursement Account No. 709 based on anticipated collections.
Total, Goal A, PREPAREDNESS AND PREVENTION	\$7,096,754,462	\$1,507,251,271	(\$5,589,503,191)	(78.8%)	
GENERAL REVENUE FUNDS	\$552,967,898	\$367,138,016	(\$185,829,882)	(33.6%)	

**Department of State Health Services
Funding Changes and Recommendations by Strategy - Senate**

Strategy/Fund Type/Goal	2022-23 Base	2024-25 Recommended	Biennial Change	% Change	Comments
GR DEDICATED	\$56,555,821	\$61,277,603	\$4,721,782	8.3%	
FEDERAL FUNDS	\$6,254,619,962	\$837,438,903	(\$5,417,181,059)	(86.6%)	
OTHER FUNDS	\$232,610,781	\$241,396,749	\$8,785,968	3.8%	
MATERNAL AND CHILD HEALTH B.1.1	\$108,230,428	\$110,383,221	\$2,152,793	2.0%	
GENERAL REVENUE FUNDS	\$33,606,011	\$33,606,011	\$0	0.0%	
GR DEDICATED	\$0	\$0	\$0	0.0%	
FEDERAL FUNDS	\$61,294,451	\$64,056,718	\$2,762,267	4.5%	Recommendations include: a \$3.2 million increase the Maternal and Child Health Services Block Grant maintaining FY2023 spending levels (See Selected Fiscal and Policy Issue #14); a decrease of \$0.2 million in Medicaid 50/50 match funds; an increase of \$0.1 million in Rape Prevention Education; and a \$0.3 million decrease in federal funding for preventing maternal death committee, motherhood and infant health, and newborn hearing and hearing surveillance.
OTHER FUNDS	\$13,329,966	\$12,720,492	(\$609,474)	(4.6%)	Recommendations reflect a decrease of \$0.6 million in Interagency Contracts and less than \$0.1 million in Appropriated Receipts.
CHILDREN WITH SPECIAL NEEDS B.1.2	\$25,101,000	\$22,383,880	(\$2,717,120)	(10.8%)	
GENERAL REVENUE FUNDS	\$10,918,678	\$10,918,678	\$0	0.0%	
GR DEDICATED	\$0	\$0	\$0	0.0%	
FEDERAL FUNDS	\$14,182,322	\$11,465,202	(\$2,717,120)	(19.2%)	Recommendations include a reduction to the Maternal and Child Health Services Block Grant. (See Selected Fiscal and Policy Issue #14)
OTHER FUNDS	\$0	\$0	\$0	0.0%	
EMS AND TRAUMA CARE SYSTEMS B.2.1	\$210,623,382	\$194,870,313	(\$15,753,069)	(7.5%)	
GENERAL REVENUE FUNDS	\$6,502,235	\$6,577,268	\$75,033	1.2%	Recommendations include: a MOF swap of \$0.6 million with Coronavirus Relief Funds in fiscal year 2022 (See Selected Fiscal and Policy Issue #4); and a decrease of \$0.1 million related to the one-time start-up funding for the customer service IT project in the biennium.

**Department of State Health Services
Funding Changes and Recommendations by Strategy - Senate**

Strategy/Fund Type/Goal	2022-23 Base	2024-25 Recommended	Biennial Change	% Change	Comments
GR DEDICATED	\$181,826,506	\$188,293,045	\$6,466,539	3.6%	Recommendations include an increase of \$6.1 million in General Revenue - Dedicated Account No. 5111, Trauma Facility and EMS (See Selected Fiscal and Policy Issue #3); and an increase of \$0.4 million to General Revenue - Dedicated Account No. 512, Bureau of Emergency Management (See Selected Fiscal and Policy Issue #2).
FEDERAL FUNDS	\$22,294,641	\$0	(\$22,294,641)	(100.0%)	Recommendations decrease \$21.7 million in State Fiscal Recovery Funds and \$0.6 million of Coronavirus Relief Funds. (See Selected Fiscal and Policy Issue #4)
OTHER FUNDS	\$0	\$0	\$0	0.0%	
TEXAS PRIMARY CARE OFFICE B.2.2	\$21,733,609	\$1,677,966	(\$20,055,643)	(92.3%)	
GENERAL REVENUE FUNDS	\$0	\$0	\$0	0.0%	
GR DEDICATED	\$749,192	\$766,616	\$17,424	2.3%	Recommendations reflect a MOF swap with Coronavirus Relief Funds in fiscal year 2022. (See Selected Fiscal and Policy Issue #4)
FEDERAL FUNDS	\$20,533,265	\$460,198	(\$20,073,067)	(97.8%)	Recommendations decrease \$20.0 million in federal funds State Fiscal Recovery Funds (See Selected Fiscal and Policy Issue #4).
OTHER FUNDS	\$451,152	\$451,152	\$0	0.0%	
Total, Goal B, COMMUNITY HEALTH SERVICES	\$365,688,419	\$329,315,380	(\$36,373,039)	(9.9%)	
GENERAL REVENUE FUNDS	\$51,026,924	\$51,101,957	\$75,033	0.1%	
GR DEDICATED	\$182,575,698	\$189,059,661	\$6,483,963	3.6%	
FEDERAL FUNDS	\$118,304,679	\$75,982,118	(\$42,322,561)	(35.8%)	
OTHER FUNDS	\$13,781,118	\$13,171,644	(\$609,474)	(4.4%)	
FOOD (MEAT) AND DRUG SAFETY C.1.1	\$61,977,305	\$61,139,298	(\$838,007)	(1.4%)	
GENERAL REVENUE FUNDS	\$25,407,448	\$27,201,855	\$1,794,407	7.1%	Recommendations include: a MOF swap of \$2.8 million with Coronavirus Relief Funds in fiscal year 2022 (See Selected Fiscal and Policy Issue #4); a reduction of \$0.1 million in one-time start-up costs for the customer service IT project; and a MOF swap of \$0.8 million with General Revenue - Dedicated Account No. 5022, Oyster Sales in the 2024-25 biennium.

**Department of State Health Services
Funding Changes and Recommendations by Strategy - Senate**

Strategy/Fund Type/Goal	2022-23 Base	2024-25 Recommended	Biennial Change	% Change	Comments
GR DEDICATED	\$21,396,451	\$22,251,877	\$855,426	4.0%	Recommendations reflect: an increase of \$0.4 million in General Revenue - Dedicated Account No. 341, Food and Drug Fee (See Selected Fiscal and Policy Issue #2); an increase of \$1.2 million in General Revenue - Dedicated Account No. 5024, Food and Drug Registration (See Selected Fiscal and Policy Issue #2); and a MOF swap of \$0.8 million in General Revenue - Dedicated Account No. 5022, Oyster Sales with General Revenue in the 2024-25 biennium.
FEDERAL FUNDS	\$13,625,152	\$10,048,076	(\$3,577,076)	(26.3%)	Recommendations for federal funding include: a reduction of \$2.8 million in Coronavirus Relief Funds (See Selected Fiscal and Policy Issue #4); and a reduction of \$0.8 million related to grant funding for meat and poultry inspections.
OTHER FUNDS	\$1,548,254	\$1,637,490	\$89,236	5.8%	Recommendations increase Appropriated Receipts by \$0.1 million.
ENVIRONMENTAL HEALTH C.1.2	\$13,799,791	\$13,472,720	(\$327,071)	(2.4%)	
GENERAL REVENUE FUNDS	\$625,315	\$625,315	\$0	0.0%	
GR DEDICATED	\$11,144,931	\$11,381,195	\$236,264	2.1%	Recommendations reflect: an increase in General Revenue - Dedicated Account No. 36, Texas Department of Insurance Operating Fund by \$0.4 million to maintain the MOF swap related to federal funds for Coronavirus Relief Funds (See Selected Fiscal and Policy Issue #4); and a decrease of \$0.1 million related to General Revenue - Dedicated Account No. 5017, Abestos Removal Licensure.
FEDERAL FUNDS	\$1,958,811	\$1,466,210	(\$492,601)	(25.1%)	Recommendations reflect a decrease of \$0.1 million in grants for lead and asbestos compliance, as well as air pollution control program; and a decrease of \$0.4 million in Coronavirus Relief Funds (See Selected Fiscal and Policy Issue #4).
OTHER FUNDS	\$70,734	\$0	(\$70,734)	(100.0%)	Recommendations decrease Interagency Contracts.
RADIATION CONTROL C.1.3	\$18,395,718	\$18,159,111	(\$236,607)	(1.3%)	
GENERAL REVENUE FUNDS	\$14,056,619	\$15,015,187	\$958,568	6.8%	Recommendations include an increase of \$0.9 million to reflect a MOF swap Coronavirus Relief Funds. (See Selected Fiscal and Policy Issue #2)
GR DEDICATED	\$2,039,524	\$2,213,252	\$173,728	8.5%	Recommendations reflect an increase of \$0.2 million in General Revenue - Dedicated Account No. 5021, Certificate of Mammography Systems.

**Department of State Health Services
Funding Changes and Recommendations by Strategy - Senate**

Strategy/Fund Type/Goal	2022-23 Base	2024-25 Recommended	Biennial Change	% Change	Comments
FEDERAL FUNDS	\$2,255,109	\$894,672	(\$1,360,437)	(60.3%)	Recommendations include a reduction of \$1.3 million in Coronavirus Relief federal funds, and an additional decrease of \$0.1 million for project grants for energy and waste isolation plants.
OTHER FUNDS	\$44,466	\$36,000	(\$8,466)	(19.0%)	Recommendations decrease Appropriated Receipts by less than \$0.1 million.
TEXAS.GOV C.1.4	\$1,412,256	\$1,412,256	\$0	0.0%	
GENERAL REVENUE FUNDS	\$776,834	\$776,834	\$0	0.0%	
GR DEDICATED	\$635,422	\$635,422	\$0	0.0%	
FEDERAL FUNDS	\$0	\$0	\$0	0.0%	
OTHER FUNDS	\$0	\$0	\$0	0.0%	
Total, Goal C, CONSUMER PROTECTION SERVICES	\$95,585,070	\$94,183,385	(\$1,401,685)	(1.5%)	
GENERAL REVENUE FUNDS	\$40,866,216	\$43,619,191	\$2,752,975	6.7%	
GR DEDICATED	\$35,216,328	\$36,481,746	\$1,265,418	3.6%	
FEDERAL FUNDS	\$17,839,072	\$12,408,958	(\$5,430,114)	(30.4%)	
OTHER FUNDS	\$1,663,454	\$1,673,490	\$10,036	0.6%	
AGENCY WIDE IT PROJECTS D.1.1	\$61,946,507	\$74,525,586	\$12,579,079	20.3%	
GENERAL REVENUE FUNDS	\$34,560,756	\$62,220,004	\$27,659,248	80.0%	Recommendation include: an increase of \$27.7 million for Data Center Consolidation Services based on Department of Information Resource estimates. (See Selected Fiscal and Policy Issue #7)
GR DEDICATED	\$914,174	\$914,156	(\$18)	(0.0%)	
FEDERAL FUNDS	\$24,709,933	\$10,491,740	(\$14,218,193)	(57.5%)	Recommendations include a decrease of \$15.0 million in COVID-19 consortia grants (See Selected Fiscal and Policy Issue #4 and 7) and an increase of \$0.8 million in grants utilized across the agency (See Selected Fiscal and Policy Issue #7).
OTHER FUNDS	\$1,761,644	\$899,686	(\$861,958)	(48.9%)	Recommendations reduce Appropriate Receipts by \$0.9 million.
Total, Goal D, AGENCY WIDE IT PROJECTS	\$61,946,507	\$74,525,586	\$12,579,079	20.3%	
GENERAL REVENUE FUNDS	\$34,560,756	\$62,220,004	\$27,659,248	80.0%	
GR DEDICATED	\$914,174	\$914,156	(\$18)	(0.0%)	
FEDERAL FUNDS	\$24,709,933	\$10,491,740	(\$14,218,193)	(57.5%)	

**Department of State Health Services
Funding Changes and Recommendations by Strategy - Senate**

Strategy/Fund Type/Goal	2022-23 Base	2024-25 Recommended	Biennial Change	% Change	Comments
OTHER FUNDS	\$1,761,644	\$899,686	(\$861,958)	(48.9%)	
CENTRAL ADMINISTRATION E.1.1	\$49,828,913	\$43,514,246	(\$6,314,667)	(12.7%)	
GENERAL REVENUE FUNDS	\$13,428,282	\$13,529,226	\$100,944	0.8%	Recommendations include a MOF swap of \$0.1 million with Coronavirus Relief Funds in fiscal year 2022. (See Selected Fiscal and Policy Issue #4)
GR DEDICATED	\$593,868	\$593,868	\$0	0.0%	
FEDERAL FUNDS	\$34,878,253	\$28,416,270	(\$6,461,983)	(18.5%)	Recommendations reflect a decrease of \$9.0 million in COVID-19 consortia grants. (See Selected Fiscal and Policy Issue #4); an increase of \$2.0 million in federal funding for public health emergency preparedness, bioterrorism preparedness, maternal and child health, immunization, and the HIV formula grant; and an increase of \$0.5 million in funding with various smaller federally supported programs (e.g., Cancer Prevention and Control, Child Lead Poisoning Prevention, State Administration for Supplemental Nutrition Assistance Program, etc.).
OTHER FUNDS	\$928,510	\$974,882	\$46,372	5.0%	Recommendations increase Interagency Contracts by \$0.1 million and reduce Appropriated receipts by less than \$0.1 million.
IT PROGRAM SUPPORT E.1.2	\$38,352,430	\$37,961,587	(\$390,843)	(1.0%)	
GENERAL REVENUE FUNDS	\$37,813,365	\$37,813,365	\$0	0.0%	
GR DEDICATED	\$4,532	\$4,532	\$0	0.0%	
FEDERAL FUNDS	\$534,533	\$143,690	(\$390,843)	(73.1%)	Recommendations include reductions in federal funding for Public Health Emergency and National Bioterrorism Preparedness, Maternal and Child Health Services Block Grant, Immunization, and HIV prevention and care program grants.
OTHER FUNDS	\$0	\$0	\$0	0.0%	
OTHER SUPPORT SERVICES E.1.3	\$4,945,763	\$5,393,536	\$447,773	9.1%	
GENERAL REVENUE FUNDS	\$635,648	\$635,648	\$0	0.0%	
GR DEDICATED	\$1,471,449	\$1,479,736	\$8,287	0.6%	Recommendations include a MOF swap with Coronavirus Relief Funds in fiscal year 2022. (See Selected Fiscal and Policy Issue #4)

**Department of State Health Services
Funding Changes and Recommendations by Strategy - Senate**

Strategy/Fund Type/Goal	2022-23 Base	2024-25 Recommended	Biennial Change	% Change	Comments
FEDERAL FUNDS	\$2,804,666	\$3,244,152	\$439,486	15.7%	Recommendations include increases to federal funding for Public Health Emergency and National Bioterrorism Preparedness, Maternal and Child Health Services Block Grant, Immunization, and HIV prevention and care program grants.
OTHER FUNDS	\$34,000	\$34,000	\$0	0.0%	
REGIONAL ADMINISTRATION E.1.4	\$2,690,086	\$2,685,830	(\$4,256)	(0.2%)	
GENERAL REVENUE FUNDS	\$2,334,368	\$2,477,426	\$143,058	6.1%	Recommendations include a MOF swap of \$0.1 million with Coronavirus Relief Funds in fiscal year 2022. (See Selected Fiscal and Policy Issue #4)
GR DEDICATED	\$31,954	\$31,954	\$0	0.0%	
FEDERAL FUNDS	\$323,764	\$176,450	(\$147,314)	(45.5%)	Recommendations include a MOF swap related to Coronavirus Relief Funds in fiscal year 2022 maintaining through fiscal year 2025. (See Selected Fiscal and Policy Issue #4)
OTHER FUNDS	\$0	\$0	\$0	0.0%	
Total, Goal E, INDIRECT ADMINISTRATION	\$95,817,192	\$89,555,199	(\$6,261,993)	(6.5%)	
GENERAL REVENUE FUNDS	\$54,211,663	\$54,455,665	\$244,002	0.5%	
GR DEDICATED	\$2,101,803	\$2,110,090	\$8,287	0.4%	
FEDERAL FUNDS	\$38,541,216	\$31,980,562	(\$6,560,654)	(17.0%)	
OTHER FUNDS	\$962,510	\$1,008,882	\$46,372	4.8%	
SALARY ADJUSTMENTS F.1.1	\$0	\$35,717,114	\$35,717,114	100.0%	Recommendations reflect an increase of \$35.7 million in All Funds for statewide salary adjustments.
GENERAL REVENUE FUNDS	\$0	\$23,287,559	\$23,287,559	100.0%	
GR DEDICATED	\$0	\$5,267,161	\$5,267,161	100.0%	
FEDERAL FUNDS	\$0	\$7,162,394	\$7,162,394	100.0%	
OTHER FUNDS	\$0	\$0	\$0	0.0%	
Total, Goal F, SALARY ADJUSTMENTS	\$0	\$35,717,114	\$35,717,114	100.0%	
GENERAL REVENUE FUNDS	\$0	\$23,287,559	\$23,287,559	100.0%	
GR DEDICATED	\$0	\$5,267,161	\$5,267,161	100.0%	
FEDERAL FUNDS	\$0	\$7,162,394	\$7,162,394	100.0%	

**Department of State Health Services
Funding Changes and Recommendations by Strategy - Senate**

Strategy/Fund Type/Goal	2022-23 Base	2024-25 Recommended	Biennial Change	% Change	Comments
OTHER FUNDS	\$0	\$0	\$0	0.0%	
Grand Total, All Agency	\$7,715,791,650	\$2,130,547,935	(\$5,585,243,715)	(72.4%)	
GENERAL REVENUE FUNDS	\$733,633,457	\$601,822,392	(\$131,811,065)	(18.0%)	
GR DEDICATED	\$277,363,824	\$295,110,417	\$17,746,593	6.4%	
FEDERAL FUNDS	\$6,454,014,862	\$975,464,675	(\$5,478,550,187)	(84.9%)	
OTHER FUNDS	\$250,779,507	\$258,150,451	\$7,370,944	2.9%	

**Department of State Health Services
Summary of Federal Funds - Senate
(Dollar amounts in Millions)**

Program	Est 2022	Bud 2023	Rec 2024	Rec 2025	2022-23 Base	2024-25 Rec	2024-25 Rec % Total	Recommended Over/(Under) Base	% Change from Base
HIV Care Formula Grants	\$125.3	\$114.6	\$113.1	\$113.1	\$239.9	\$226.2	23.2%	(\$13.6)	(5.7%)
COVID-19 Epidemiology and Lab Capacity for Infectious Diseases (ELC)	\$1,588.0	\$593.2	\$198.9	\$15.9	\$2,181.2	\$214.8	22.0%	(\$1,966.3)	(90.1%)
Public Health Emergency Preparedness	\$39.8	\$39.5	\$39.5	\$39.5	\$79.3	\$79.1	8.1%	(\$0.3)	(0.3%)
Maternal and Child Health Services Block Grants to the States	\$30.0	\$32.4	\$32.4	\$32.4	\$62.3	\$64.9	6.6%	\$2.5	4.0%
Immunization Grants	\$22.8	\$28.9	\$23.3	\$23.3	\$51.6	\$46.5	4.8%	(\$5.1)	(9.8%)
HIV Prevention Activities Grants	\$27.4	\$28.1	\$26.5	\$26.5	\$55.5	\$53.0	5.4%	(\$2.5)	(4.6%)
National Bioterrorism Hospital Preparedness Program	\$16.1	\$16.0	\$16.0	\$16.0	\$32.1	\$32.0	3.3%	(\$0.0)	(0.1%)
Federal Medical Assistance Program (FMAP), 50 percent	\$7.9	\$8.2	\$8.0	\$8.0	\$16.1	\$15.9	1.6%	(\$0.1)	(0.9%)
Preventive Health Services-STD Control Grants	\$7.6	\$7.5	\$7.3	\$7.3	\$15.0	\$14.7	1.5%	(\$0.4)	(2.5%)
Project & Cooperative Agreements for Tuberculosis Control	\$8.0	\$7.3	\$7.3	\$7.3	\$15.3	\$14.6	1.5%	(\$0.7)	(4.3%)
Housing Opportunities for Persons with AIDS	\$5.9	\$7.4	\$6.8	\$6.8	\$13.3	\$13.5	1.4%	\$0.3	2.0%
Preventive Health and Health Services Block Grant	\$7.6	\$8.2	\$6.4	\$6.4	\$15.8	\$12.7	1.3%	(\$3.1)	(19.8%)
Meat and Poultry Inspections State Programs	\$5.2	\$4.9	\$4.7	\$4.7	\$10.1	\$9.4	1.0%	(\$0.7)	(7.1%)
Epidemiology & Lab Capacity for Infectious Diseases (ELC)	\$3.8	\$3.7	\$3.3	\$3.3	\$7.5	\$6.7	0.7%	(\$0.8)	(10.8%)
National and State Tobacco Control Program	\$3.8	\$3.0	\$3.0	\$3.0	\$6.8	\$6.0	0.6%	(\$0.8)	(11.5%)
Rape Prevention Education	\$2.6	\$2.8	\$2.8	\$2.8	\$5.4	\$5.5	0.6%	\$0.2	2.8%
Prevention and Management of Diabetes, Heart Disease, and Stroke	\$2.6	\$2.7	\$2.7	\$2.7	\$5.3	\$5.4	0.6%	\$0.1	2.0%
Other Maternal and Children's Health Grants	\$3.1	\$2.6	\$2.6	\$2.6	\$5.7	\$5.1	0.5%	(\$0.6)	(9.8%)
Other COVID-19 Grants ¹	\$3,099.6	\$117.3	\$54.2	\$45.6	\$3,216.9	\$99.9	10.2%	(\$3,117.0)	(96.9%)
All Other Grants ²	\$293.4	\$125.6	\$31.3	\$18.1	\$419.0	\$49.4	5.1%	(\$369.5)	(88.2%)
TOTAL:	\$5,300.4	\$1,153.6	\$590.1	\$385.4	\$6,454.0	\$975.5	100.0%	(\$5,478.6)	(84.9%)

1) All Other COVID-19 Grants include Coronavirus State Fiscal Recovery Funds appropriated through Senate Bill 8, Eighty-seventh Legislature, Third Called Session, 2021, Public Assistance reimbursement grants, and other public health awards from the Centers for Disease Control and Prevention and Health Resources and Services Administration in response to the COVID-19 pandemic. The total allocation of Coronavirus State Fiscal Recovery Funds includes a \$100.0 million budget execution transfer (October 27, 2022) to the Texas Department of Emergency Management.

2) All Other Grants include federal grants to prevent, or respond to, various public health concerns, and a placeholder for statewide salary adjustments.

**Department of State Health Services
FTE Highlights - Senate**

Full-Time-Equivalent Positions	Expended 2021	Estimated 2022	Budgeted 2023	Recommended 2024	Recommended 2025
Cap	3,254.9	3,365.6	3,301.3	3,304.7	3,304.7
Actual/Budgeted	3,343.8	3,402.8	3,900.5	NA	NA

Schedule of Exempt Positions (Cap)					
Commissioner, Group 8	\$271,083	\$271,083	\$271,083	\$271,083	\$271,083

Notes:

- a) The FTEs for fiscal year 2022 and 2023 was increased above the cap by 594.0 and 595.8 FTEs, respectively, for vaccine administration, IT system upgrades, and laboratory expansion, infectious disease prevention unit, and public health workforce development, and disease intervention specialist workforce development related to COVID-19 pursuant to Article IX, Section 6.10 (f), Limitation to State Employment Leveles. In addition to the reflected above amounts, the agency increased its FTE cap by 3.4 FTEs pursuant ot Rider 27, Hemp Regulation.
- b) Adjustments to the actuals/budgeted amount for fiscal year 2022 reflects the annual average as reported by the agency.
- c) Recommendation for the fiscal year 2024 and 2025 FTE cap with an authorized increase pursuant to Rider 27, Hemp regulations of 3.4 FTEs, and a decrease of 595.8 for one-time federally-funded FTEs related to the agency's COVID-19 response.
- d) The Commissioner's salary cap for fiscal year 2021 and beyond reflects a salary increase approved in April 2020.