

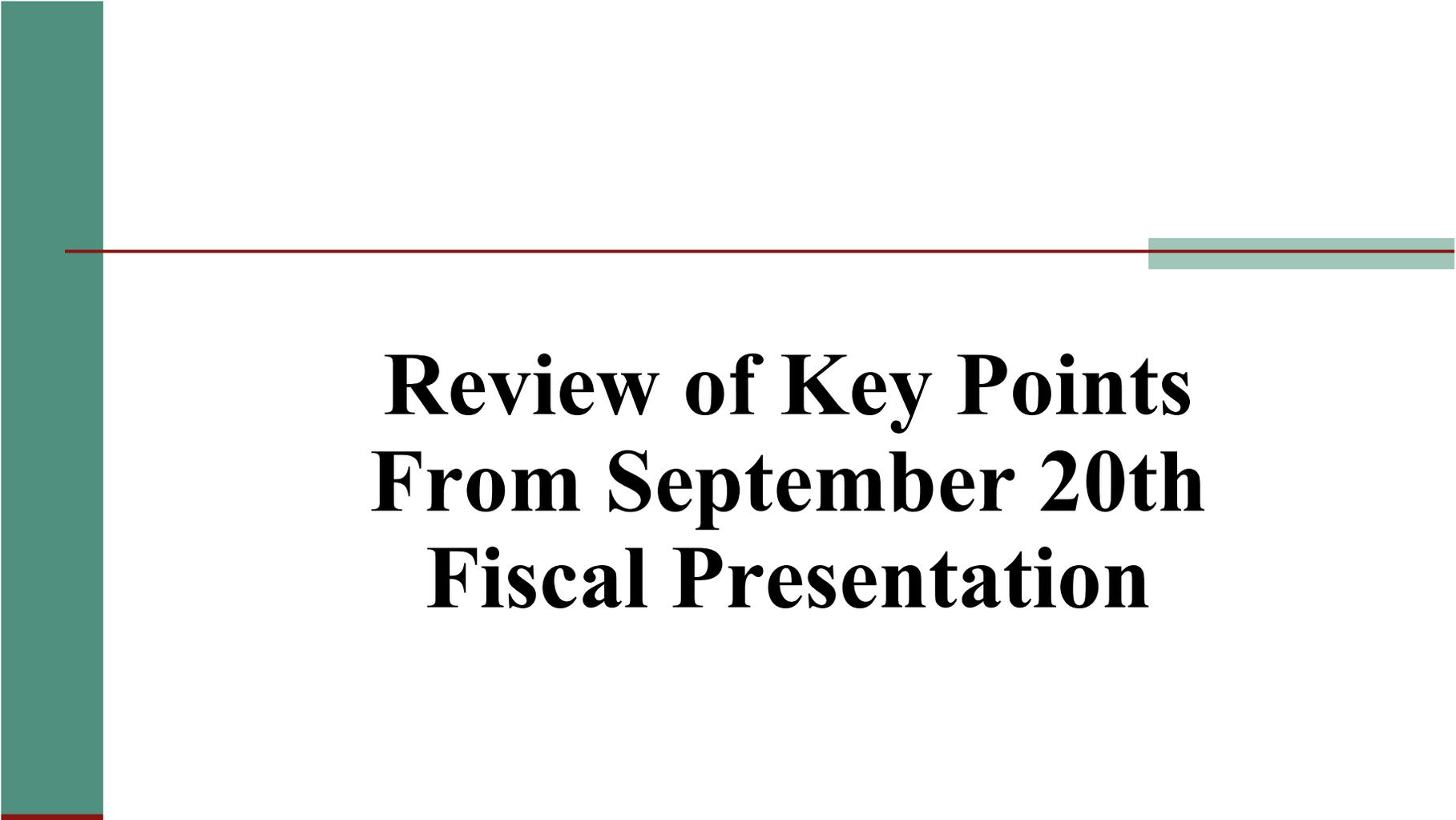


Local Public Health Financing Trends

**Background Material for the
Joint Select Committee on Public Health**

Legislative Fiscal Committee Staff

November 10, 2005



Review of Key Points From September 20th Fiscal Presentation

Key Points on Total Spending

- Spending on Washington's public health system increased by 18% during 1998 – 2004, after controlling for inflation and population growth.
 - state department-level spending increased by 20% per state resident.
 - local department-level spending increased by 16% per resident.

Key Points on Federal Funding

- Federal revenues are the largest single source of public health funding, at both the state and local levels. They have also grown the most.
 - federal funding comprises 52% of the state DoH budget, and increased by 21% per resident during 1998 – 2004.
 - federal funding comprises 40% of local health department budgets, and grew 43% per resident during 1998 – 2004.

Key Points on State Funding

- State revenues fund 25% of the public health system – 31% at the state level, and 21% at the local.
 - inflation-adjusted spending per resident increased 22% between 1998 and 2001, due to the MVET backfill and the national tobacco settlement.
 - since then, state funding has not kept pace with inflation and population growth.

Key Points on User Fees

- Licenses, permits, and other user fees account for 16% of total spending, at both the state and local levels.
 - state and local user fees both increased about 15% per resident during 1998 – 2004.

Key Points on Local Tax Support

- Local taxes and other contributions fund about 25% of the cost of local health department functions.
 - local tax support for public health generally kept pace with inflation and population during 1998 – 2004; however
 - continuing to do so is likely to be challenging, given I-747 revenue limits and growing criminal justice costs.



Disparities in Local-Level Public Health Spending

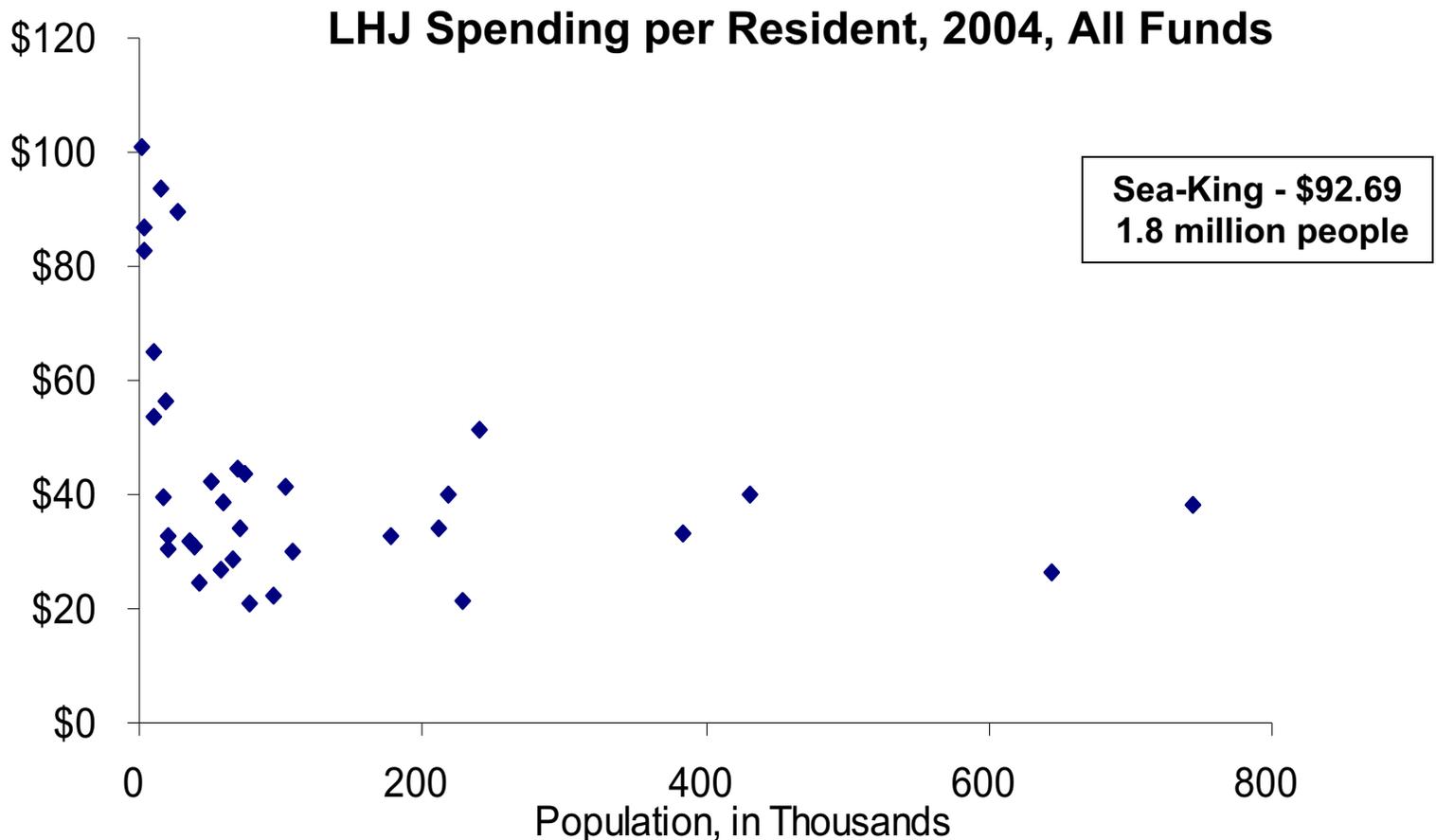
There is substantial spending variation among local health jurisdictions.

2004 Local-Level Spending per Resident

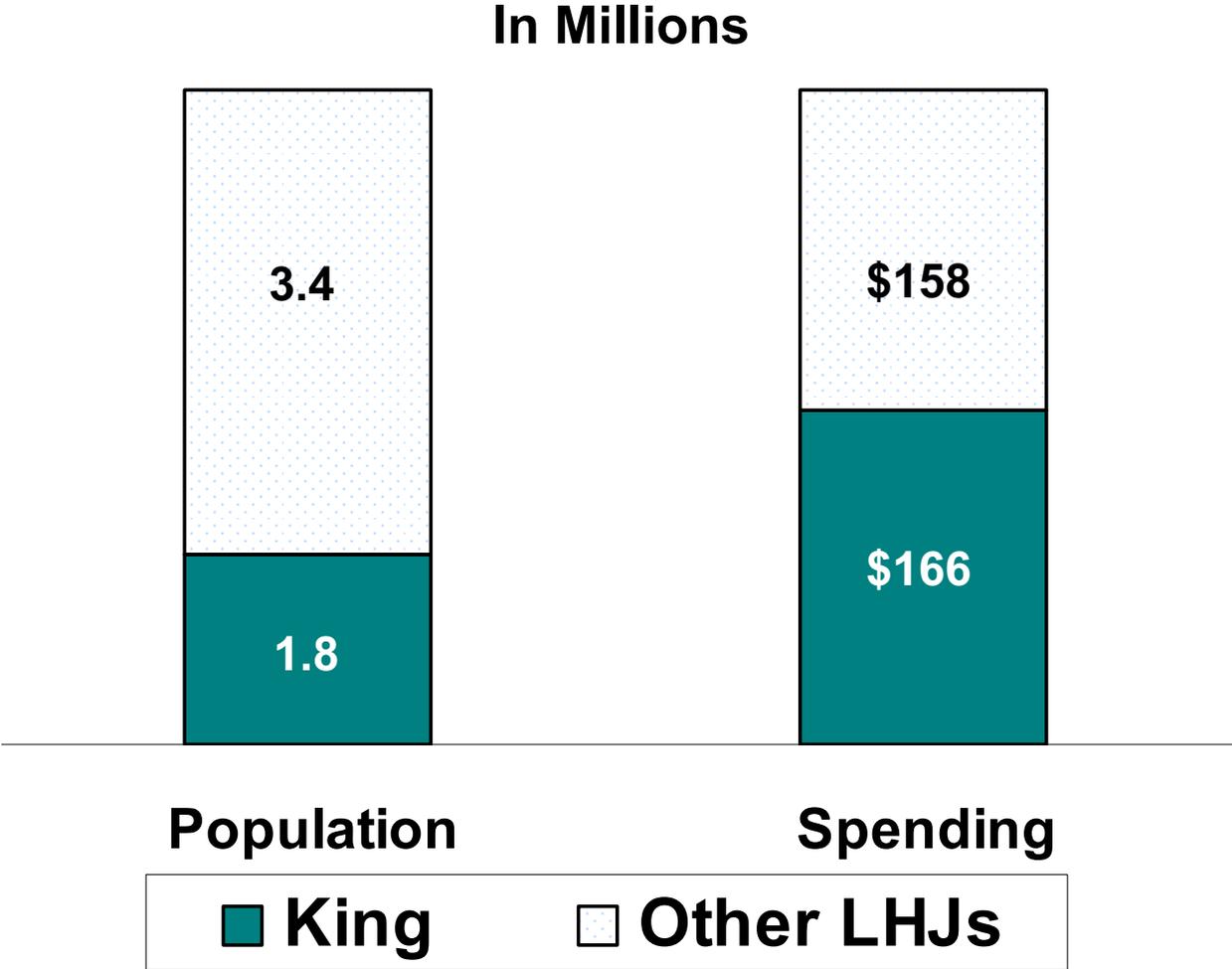


	# of LHJs
< \$30	7
\$30 - \$40	14
\$40 - \$60	7
> \$60	7

Spending per resident is highest in the smallest jurisdictions, and in King County. Elsewhere, there is no consistent relationship between spending and population.

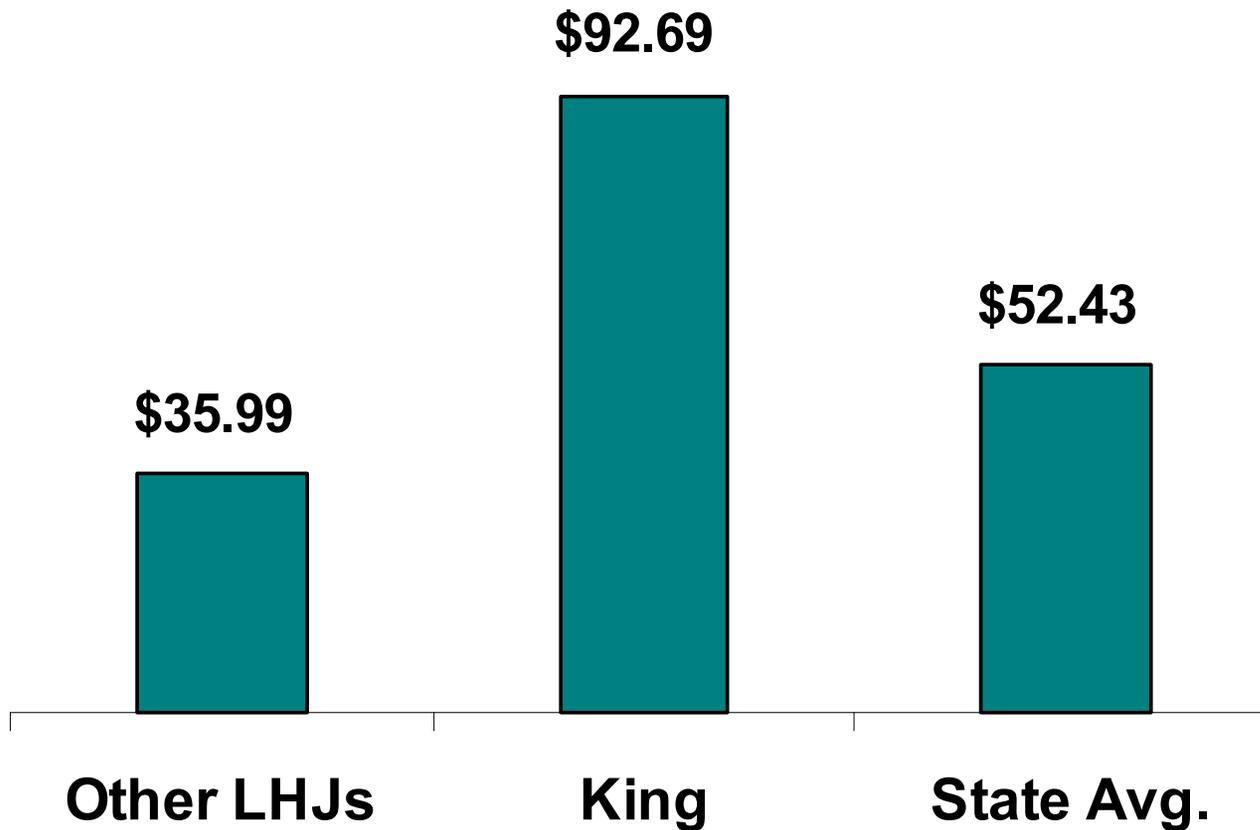


King County has 29% of the state's population, but accounts for 51% of all local health department spending.



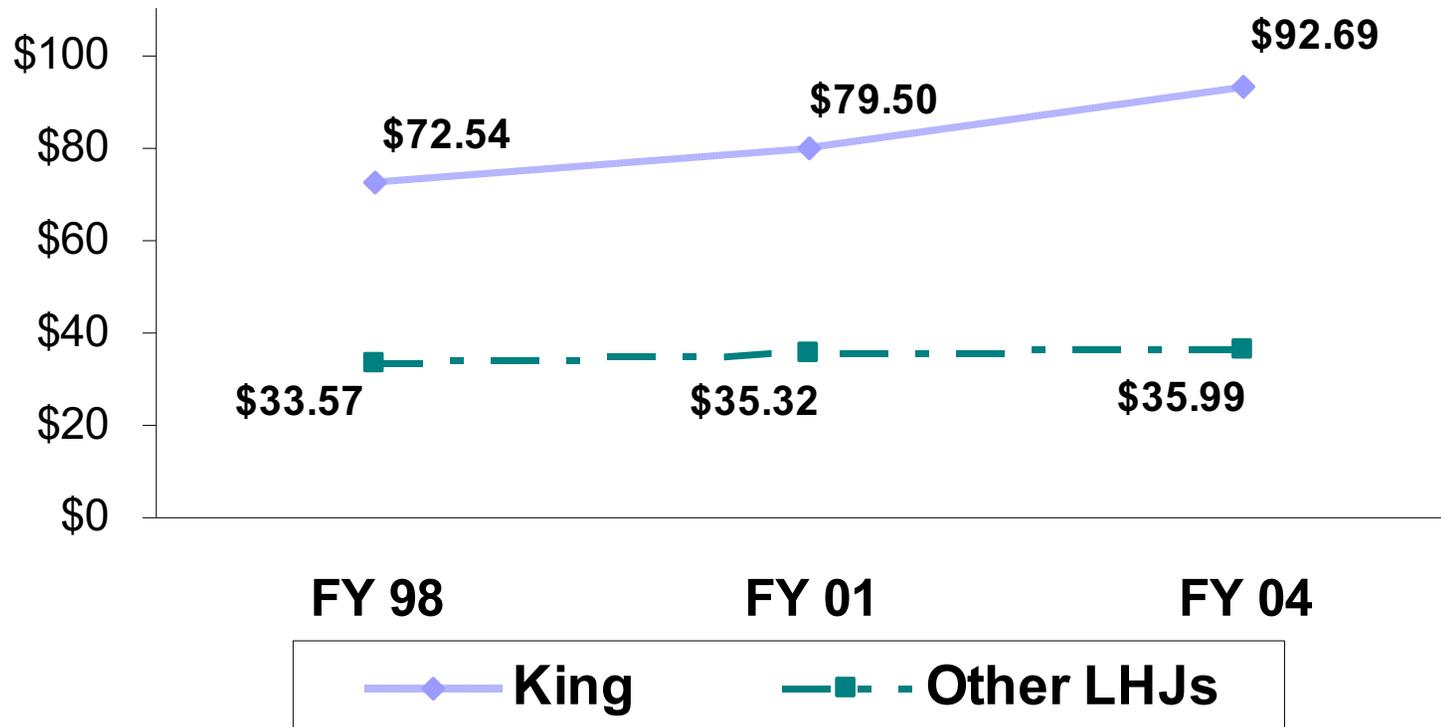
On average, the other 34 local health jurisdictions spent about 60% less per resident last year than King County.

Local Public Health Spending per Resident, 2004



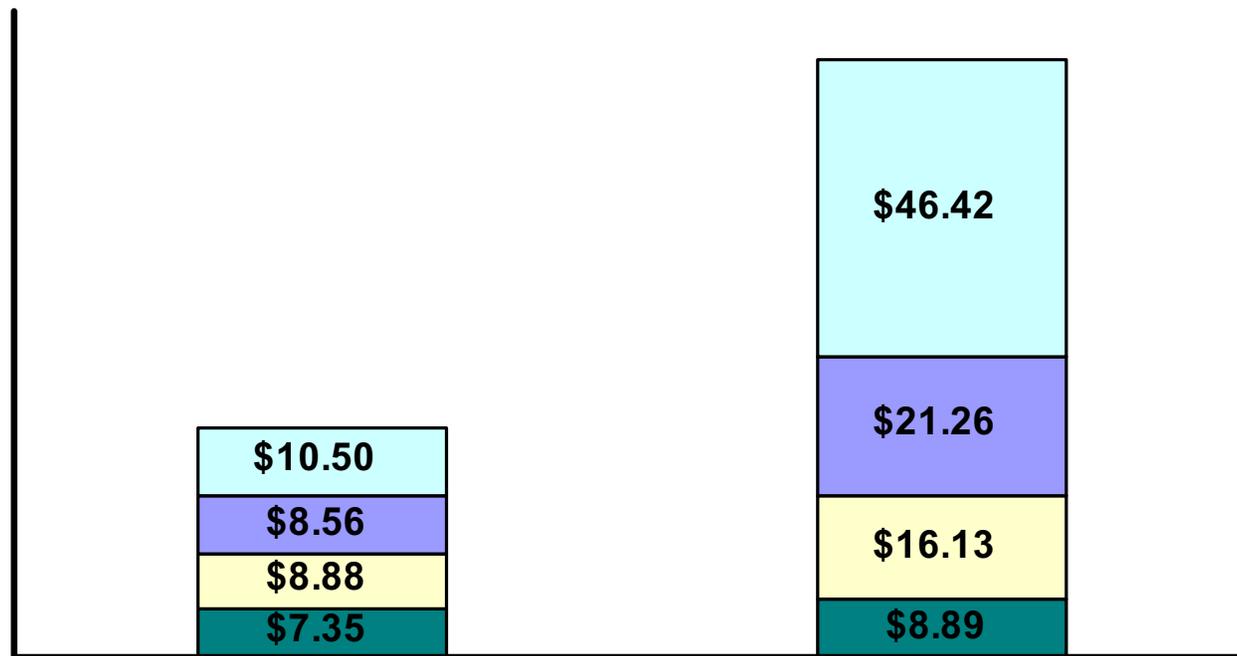
During 1998-2004, local public health spending grew by 28% per resident in King County, and by 7% in other jurisdictions.

**Local Health Department Spending per Person
Inflation-Adjusted to 2004 Dollars**



Spending per resident is higher in King County, from all revenue sources.

2004 Spending per Resident



Other LHJs

King

Local Fees

State Funds

Local Taxes

Federal Funds

King is more dependent upon federal funds, and less dependent upon fee revenues, than other LHJs.

