



Interagency Council on Homelessness
Budget Engagement Session
Focus: Health Focus (DBH, DC Health, DHCF)



17 April 2024

Updated: 15 April 2024



Convention for Recording Budget Engagement Sessions:

- ❖ Recording for purposes of complying with the Open Meeting Act requirements
- ❖ Available for anyone who requests a copy at ich.info@dc.gov.

Meeting Agenda



- I. **Welcome & Agenda Review (10 mins)**
 - a) Agenda Review
 - b) Level Setting, including Introductions
- II. **Department of Health Care Finance (DHCF) (25 mins)**
- III. **DC Department of Behavioral Health (DBH) (25 mins)**
- IV. **DC Health (25 mins)**
- V. **Announcements & Reminders (as needed)**
- VI. **Summary & Adjournment (5 mins)**

Level Setting



- ❖ Virtually engaging ICH Full Council to meet the legislated mandate at [DC Code § 4-752.02\(c\)](#) to comment on the Mayor's Proposed Budget

The Mayor shall, upon release of the proposed annual budget each year, make available to all Interagency Council members the District's proposed budget breakdown of each agency's appropriations for services within the Continuum of Care. The Interagency Council shall give comments to the Mayor regarding the proposed budget.

ICH Full Council



❖ Comprised of DC Gov & Community Representatives

DC Gov Representatives – Responsible for providing breakdown of Mayor’s Proposed Budget	
City Administrator, Chair	DC Housing Authority
Deputy Mayor for Health and Human Services	Department of Corrections
Interagency Council on Homelessness	Department of Employment Services
Department of Human Services	Office of the State Superintendent of Education
Department of Behavioral Health	Homeland Security and Emergency Management Agency
Child and Family Services Agency	Department of General Services
Department of Housing and Community Development	DC Metropolitan Police
Department of Health	Office of LGBTQ Affairs

ICH Full Council



❖ Community Representatives – opportunity to provide comments

Providers
Amanda Chesney, Catholic Charities (2025)
Angela Jones Hackley, Covenant House Greater Washington (2025)
Kelly Sweeney McShane, Community of Hope (2025)
Adam Rocard, Miriam's Kitchen (2026)
Christy Respress, Pathways to Housing (2026)
Lynn Amano, Friendship Place (2026)
Nikila Smith, Street Sense Vendor Program (2026)
Roxanne Murray, Echelon Community Services (2026)

Lived Experience
Qaadir El-Amin, People for Fairness Coalition (2025)
Reginald Black, People for Fairness Coalition (2025)
Daniel Rico, Sasha Bruce Youthwork (2026)
Rico Harris, Community for Creative Non-Violence (2026)

Advocates
Karen Cunningham, Everyone Home DC (2025)
Kate Coventry, DC Fiscal Policy Institute (2025)
Deborah Jones, Housing Up (2026)
Rachelle Ellison, People for Fairness Coalition (2026)

ICH Full Council Members Continued



Business/Private

Catherine Crosland, Unity Healthcare (2025)

Shellon Fraser, National Housing Trust (2025)

Tobie Smith, Street Health DC (2026)

Tonia Wellons, Great Washington Community Foundation (2026)

Collaborative Applicant

Sue Marshall, The Community Partnership to End Homelessness

Non-Voting Seats

Chairman, DC Council, Phil Mendelson

Councilmember, DC Council Committee on Housing, Robert C. White, Jr.

Compiling Comments from Community



❖ Notes & Review

- Immediate follow-up with lives notes
- Formal meeting notes within 5 business days

❖ Sharing via

- Email to ICH Full Council &
- Updates to the ICH Calendar online for each budget engagement session page

Comments Received To Date



- ❖ Captured in ICH Budget Oversight Testimony
- ❖ Highlighting comments for Executive Committee and March ICH Full Council Meeting

ICH Forum	Comments and Concern
02/20 Executive CMTE	<ul style="list-style-type: none">• Continued need to understand the context – what is causing the budget constraints?• Request to understand the overall budget for the City and cuts to other agency budgets.• Request for transparency around FY24 cuts that go into effect as of April and whether those cuts carry forward into FY25.• Concern about programs serving the most people, have the highest demand (e.g., ERAP).• Concern about pandemic-related protection measures that cannot be supported by local budgets.• Feedback highlighting the disparities between programs and services for single adults, including young adults, and the disproportionate impact of budget cuts on Single and Young adults.

Comments Received To Date Continued



- ❖ Captured in Budget Oversight Testimony
- ❖ Highlighting comments for Executive Committee and March ICH Full Council Meeting

ICH Forum	Comments and Concern
<p>03/12 ICH Full Council</p>	<ul style="list-style-type: none"> ● Overall concerns: <ul style="list-style-type: none"> ○ Options for generating revenue -- Have all options been considered? ○ Understanding how different and new initiatives are funded – Why can the District fund Downtown or Arena-related efforts or new crime reduction-related initiatives if homeless services have to take cuts? ○ Focus ICH Budget engagement sessions on the FY24 cuts and how that carries forward into FY25 ○ Specify how cuts will impact programs/services -- How many residents will be impacted? How many staff will be impacted? ● Areas that people would like to focus on <ul style="list-style-type: none"> ○ Resources for Single Adults to address the significant disparities in outcomes ○ Impact on lease-up process and timeline, especially for single adults ○ Lack of medical respite ○ Importance of diversion and scaling Project Reconnect ○ Impact of OMS and funding for migrant services



Notes on Welcome & Agenda Review



ICH Lead: Theresa Silla

Presenters:

- ❖ DBH – Richard Bebout, Chief of Crisis Services
- ❖ DC Health – Carl Filler, Chief of Staff
- ❖ DCHF –
 - Wayne Turnage, Deputy Mayor, DMHHS,
 - Angelica Martin, Deputy Director of Health Finance

Feedback:

- ❖ **FL (Org): ...**

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PRESENTATION TO INTERAGENCY COUNCIL ON HOMELESSNESS

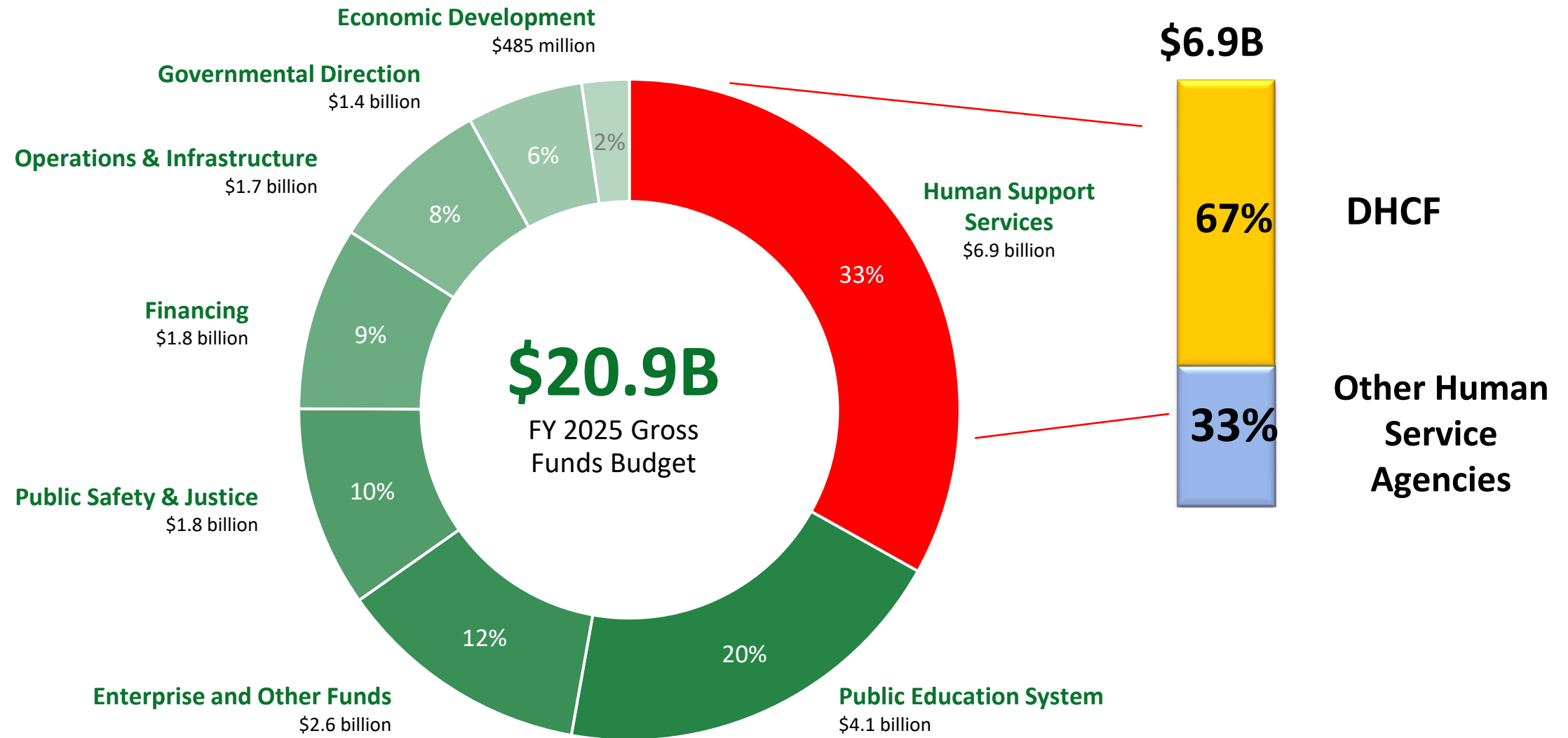
FY25

#FairShot: Strategic Investments and Shared Sacrifice

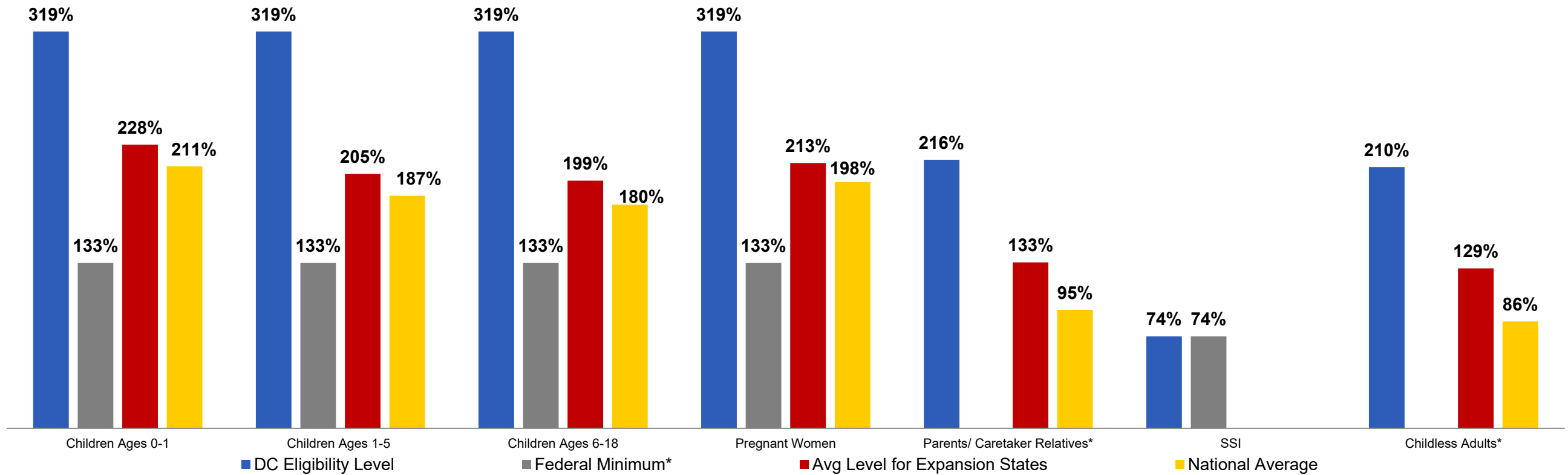
APRIL 17, 2024

- ❑ Department of Health Care Finance In Mayor's Overall Budget
- ❑ Overview of DHCF's FY2025 Budget Proposal
How DHCF's Budget Was Built
- ❑ Updated Budget for New Hospital

Human Services Programs Represent Largest Component In Mayor's Proposed FY 2025 Operating Budget And DHCf Accounts For Two-Thirds Of Planned Spending



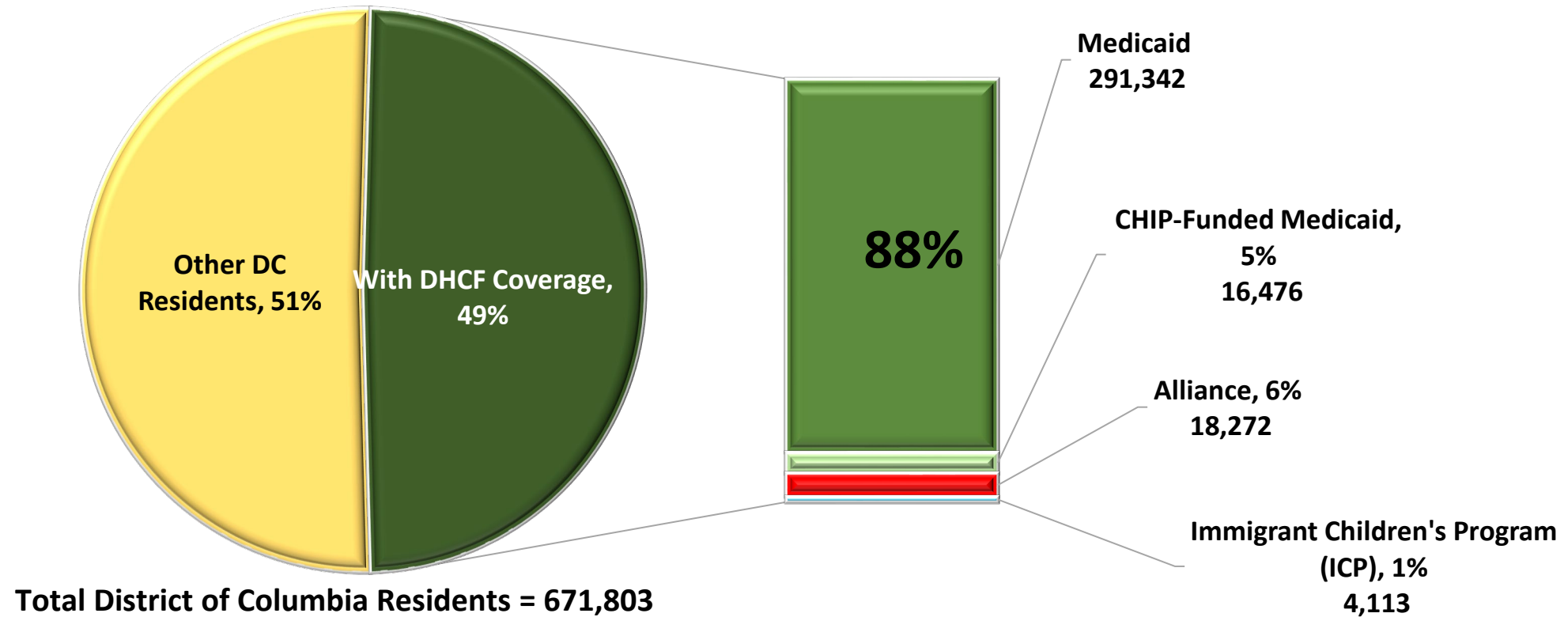
The District's Medicaid Eligibility Levels – Which Exceed Federal Requirements And Statewide Averages – Were Fully Preserved



Source: Centers for Medicare and Medicaid Services State Medicaid and CHIP Income Eligibility Standards, updated June 2016.

Nearly Half of District Residents Rely on DHCF-Funded Health Care Coverage – Most Are in Medicaid

Proportion of DC Residents with DHCF-Funded Coverage, FY 2023



Source: District population estimate reflects the U.S. Census Bureau's 2022 ACS 1-Year Data Tables. Medicaid, Alliance, and ICP data reflect FY 2023 average monthly enrollment as of 1/8/2024 from DHCF's Medicaid Management Information System.

Note: Sum of components may not equal total due to rounding.

DHCF's Proposed FY25 Budget Safeguards Access to Care and Prepare for New Federal Requirements

Whole Person Care

- Maintain eligibility criteria and ensure coverage
- Open Cedar Hill Regional Medical Center
- Comply w/ New Eligibility Rules Removing Barriers and Creating Member Protections
- Implement 1115 Whole Person Transformation Waiver
- Continue Provider Technical Assistance Projects to promote patient-centered care

Value and Accountability

- Continued Enhanced DSP Wages
- Apply hospital Average Commercial Rate (ACR)
- Implement results from various provider rate studies
- Ensure appropriate use of telehealth
- Adopt evidence-based assessment tools to guide clinical care

Federal Requirements

- Implement Justice-involved Juveniles Screening and Case Management
- Comply w/ Newly Eligibility Rules Removing Barriers and Creating Member Protections
- Offer searchable and regularly updated provider directories

FY2025 Local Budget Increases To \$1 Billion To Maintain Eligibility for Public Health Care Coverage

FY24 Recurring Budget	\$988,309,875
Less FY24 One-Time Funding	(1,780,000)
5% Savings Reduction	(49,337,972)
Plus: Cost of Living Increase	229,567
FY2025 Baseline	\$937,421,470
FY2025 Budget Need to Maintain FY24 Programs	1,128,479,607
Budget Adjustments:	
Adjustments Made During MARC Formulation	(191,058,137)
FY25 Adjusted Budget	\$ 937,421,470
Additional Programmatic Savings	(40,696,708)
Restoration of Agency Budget Reductions to Meet MARC	140,345,015
Enhancement: 12-Mth Continuous Enrollment for Children	6,852,247
Mayor's Total Budget Adjustments	\$106,500,555
FY2025 Proposed DHCF Local Budget	\$ 1,043,922,025

Key Decision Points

- Over 95% of the FY2025 budget support public health care coverage to eligible District residents
- FY25 is the first year in three years without enhanced federal Medicaid Assistance Percentage (EFMAP)
- Maintains eligibility for all DC residents eligible for public health care
- Continues community-based grants to support programs that target better health outcomes
- Establishes the Average Commercial Rate for District hospitals
- Maintains services based on reasonable clinical determinations

• Ensures compliance with CMS regulations

No Medicaid Services Were Eliminated As The District Continues With Significant Investments in Provider Services

Provider Payment Category	FY2023 Expenditures	FY2024 Approved Budget	FY2025 Proposed Budget	YoY Variance (\$)	YoY Variance (%)	Variance Explanation
Hospital	207,901,088.12	237,426,785.36	169,148,361.66	(68,278,423.70)	-40.4%	With transition to ACR, DSH payments will not be paid in FY25.
ICF/IID	102,962,384.72	93,185,166.24	114,460,654.64	21,275,488.40	18.6%	
Skilled Nursing Facility	324,068,726.60	295,415,801.46	313,224,452.93	17,808,651.47	5.7%	Nursing Facility rate increase
Primary Care (Physicians, Clinics, & FQHC)	82,864,796.79	95,035,667.96	102,155,055.17	7,119,387.21	7.0%	Increase driven primarily by estimated increase in prescribed drugs.
Other (Medicare part A, B, etc)	140,666,202.85	153,502,467.91	168,786,191.17	15,283,723.26	9.1%	
DME	21,179,513.12	21,275,076.49	13,126,390.49	(8,148,686.00)	-62.1%	Savings initiative implemented to address unit limits on excessively billed items.
Behavioral Health (Inc. BH Waiver)	186,532,811.57	178,710,090.42	84,041,594.67	(94,668,495.75)	-112.6%	Complete Federal budget not included in this total. Federal budget will be added via budget adjustment.
Skilled Care	31,342,241.68	26,284,603.53	42,565,380.44	16,280,776.91	38.2%	Increase primarily in private duty nursing. Beneficiaries utilizing significantly more of this service than in past years.
LTCS (incl PCA and PACE)	97,682,872.18	137,954,642.52	121,063,028.04	(16,891,614.48)	-14.0%	PACE enrollment has growth has been lower than anticipated.
DSNP	228,524,460.85	216,382,667.25	305,065,954.86	88,683,287.61	29.1%	Increased capitation rates and enrollment
EPD Waiver	192,147,252.51	147,249,068.86	172,611,918.55	25,362,849.69	14.7%	Increased enrollment driven partially by increased ALF capacity.
DD Waiver	326,958,411.05	241,997,890.60	258,474,146.19	16,476,255.59	6.4%	As the PHE has ended more beneficiaries are beginning to utilizing services more.
IFS Waiver	405,347.71	5,619,813.66	1,568,755.62	(4,051,058.04)	-258.2%	We anticipated higher enrollment in 23 and 24. FY25 reflects observed enrollment.
Emergency Medicaid	31,476,885.17	35,829,676.70	31,511,188.34	(4,318,488.36)	-13.7%	
Medicaid MCO	2,004,949,303.96	1,902,271,177.74	2,426,706,552.99	524,435,375.25	21.6%	
Alliance MCO	111,194,269.82	118,327,853.31	132,493,842.66	14,165,989.35	10.7%	FY25 reflects increased enrollment.
Permanent Supportive Housing	17,254,710.39	57,863,452.64	49,431,530.93	(8,431,921.71)	-17.1%	
Total	4,108,111,279.09	3,964,331,902.65	4,506,434,999.35	542,103,096.70		

Cedar Hill Regional Medical Center GW Health Construction Remains on Time and on Budget (\$434.4 million)

- Mayor’s FY25 budget includes **no** new capital funds for project and a small amount of operating funds to prepare for opening.
- Construction to finish at end of 2024. Exterior is complete, major utilities connected. Interior work continues.
- Opening to patients “early 2025. Exact timing TBD.
- District agencies and UHS have begun hospital activation meetings around all local and federal regulatory approvals.
- New CEO, Anthony Coleman, started in late December 2023.
- We have met our CBE and hiring goals. Tour for DCHA Board in May.
- Building a Comprehensive System of Care
- In February, the Mayor and UHS announced a collaboration to build a freestanding emergency department at the Fletcher-Johnson Campus in Ward 7. This is a requirement under the District’s agreement to establish a system of care and will be paid for by UHS.



CEDAR HILL
REGIONAL MEDICAL CENTER
GW HEALTH | WASHINGTON, DC

The End

Notes for DHCF



- ❖ **JC:** MH in DC poses a severe threat on homeless people. 3/15/18- spoke about closing DC General and the severe MH with staff and security. The abuse and dysfunction of the staff and it continues. When I have been labeled a certain way then I get discredited. The agencies need to be held accountable.
 - **Reflection to confirm feedback from TS (ICH):** Biggest issue is what happens with delivery of services. There is not an issue with funding but concerns are with the quality of programs and quality of staff that truly understand and respect people experiencing homelessness. You are calling for us to evaluate programs and make sure staff is supporting people and not criminalizing. Want to support staff being appropriately compensating. You want to make sure that we are holding accountable and supporting staff administering those programs.
- ❖ **JC:** should look at incentives for staff doing a really good job.
 - **TS (ICH):** on a future date can we look at value pay. And how we are making sure a whole person is supported.
 - **AM (DHCF):** we are working to support staff with salaries so that they can stay and live in the district. We can address some of your concerns if we can follow up.
- ❖ **NS (SS):** I have experienced all of these things as well and experienced all of the abuse and oppression. I have decided that I need to come to the meeting and work on the programs. I don't want to discourage other people to get the help they need because I was treated so bad.
 - **TS (ICH):** we need to make sure we are adequately funding and training staff. Also we need performance measures to make sure people are doing their jobs.
 - **NS (SS):** you can't get training for empathy. You can't just give the job to anyone who has lived experienced. You as a person have to have that in you to care for other people.

Notes for DHCF- from Chat



- ❖ **JC:** Desire for us to do better and care about the people. Programming and staff continue the cycle of abuse and homelessness. What does accountability look like? How can we see real change?
- ❖ **NS (SS):** DC Medicare marks you and makes a barrier for homeless or people with low income, to receive high quality care.
- ❖ **DJ:** One of the biggest problems faced by the people we serve is renewals for Medicaid. Has Medicaid considered requesting special renewals for Medicaid, like other states, such as clients who are homeless (receiving HSS case management services via DHS) are renewed automatically or for hard-to-reach clients with no fixed address or no telephone or have extenuating circumstances can't get to an office OR are very low income automatically renewed. Outreach workers?
 - **AM (DHCF):** DHCF has requested various renewal mitigation strategies to 1) increase number of cases that are renewed with "no touch" required by the beneficiary or passively; and 2) to renew folks who when polled return no income/ or report income for other programs like SNAP. We continue to try and make sure that we are taking advantage of all flexibilities to make the process as efficient as possible. We also have expanded out outreach to ensure the information is available
- ❖ **DJ:** Are the strategies identified being requested for approval via CMS?
 - **AM (DHCF):** yes, states require CMS approval prior to implementing many of the flexibilities.
- ❖ **DJ:** there should be other and easier ways to get recertified
 - **WT (DMHHS):** Health insurance is not affected as long as pending. If you know someone who is having trouble recertifying. They can call the agency or call me directly. Our Medicaid Director will be approaching CMS about relaxing some of the requirements. We do know there are some cases that are struggling and we want to make sure everyone gets recertified.

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Department of Behavioral Health Budget Overview

FY25

#FairShot: Strategic Investments and Shared Sacrifice

DBH Presentation to ICH

APRIL 17, 2024

Our Guiding Principles for Budget Formulation

- 1. Transform the behavioral health care system to support whole person care, meet clinical standards, and advance health equity.**
- 2. Maintain and enhance our core services to provide quality care for residents with serious and persistent mental illnesses and substance use disorders who rely on the public behavioral health system.**
- 3. Assess service array for duplication of effort and low utilization.**
- 4. Maintain supports for most vulnerable residents.**

Proposed FY 2025 Gross Operating Budget

\$385,536,240--a slight increase over the FY 24 approved budget.

	FY 2023 Actual	FY 2024 Approved	FY 2025 Proposed	% Change from FY 2024
Operating Budget	\$358,176,811	\$380,100,036	\$ 385,536,240	1.4
FTEs	1,251.4	1,439.5	1,411.9	-1.9
Capital Budget	\$5,975,877	\$9,500,000	\$7,280,000	NA
FTEs	0.0	0.0	0.0	N/A

FY24-25 Gross Budget Comparison by Funding Source

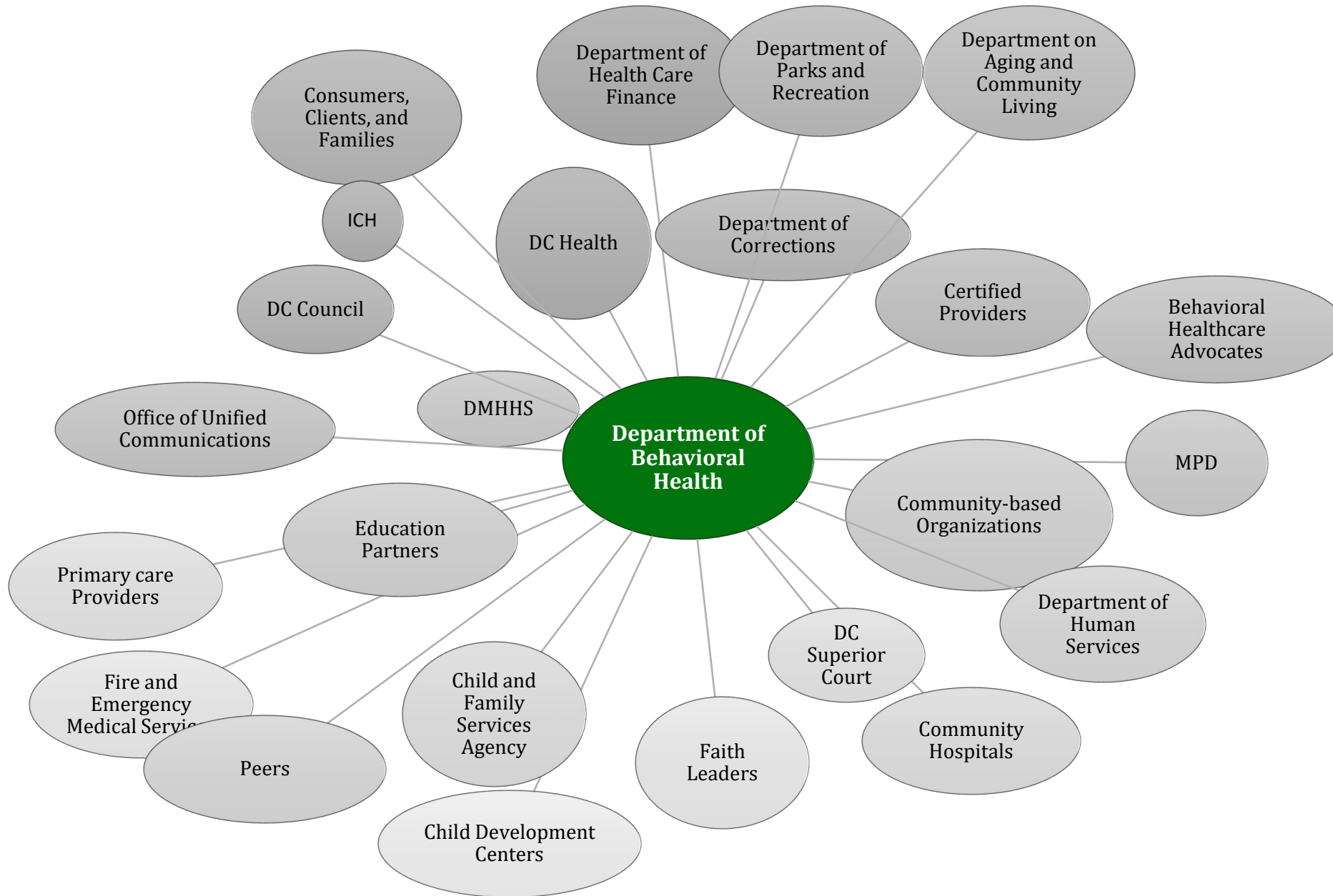
Funding Source	FY 2024 Approved	FY 2025 Proposed	Change from FY 24	% Change
Local	\$308,739	\$295,785	-\$12,954	-4.2%
Dedicated Taxes	\$0	\$0	\$0	NA
Special Purpose Revenue	\$3,558	\$18,630	\$15,073	423.6%
Federal Payments	\$9,614	\$9,614	-\$9,614	-100%
Federal Grants	\$54,525	\$66,475	-\$11,950	21.9%
Federal Medicaid Payment	\$3,317	\$4,257	\$941	28.4%
Private	\$348	\$388	\$40	11.5%
Intra-District	\$0	\$0	N/A	NA
Total Gross Funds	\$ 380,100	\$385,536	\$5,436	1.4%

Proposed FY25 Capital Budget

**\$7,280,000 for facilities projects at
Saint Elizabeths Hospital.**



Butterflies mobile in the stairwell at Saint Elizabeths Hospital.



Our Partners

\$53.9 million for mental health services which will support \$180 million in services when matched with federal dollars

\$23 million for **uninsured residents**

\$28.9 million to maintain **supported housing for about 1,700 residents**

\$820,000 for intensive care coordination

\$52.6 million for substance use disorder services

\$36.8 million to support children, youth and families that includes \$7.2 million for prevention and early identification services, and

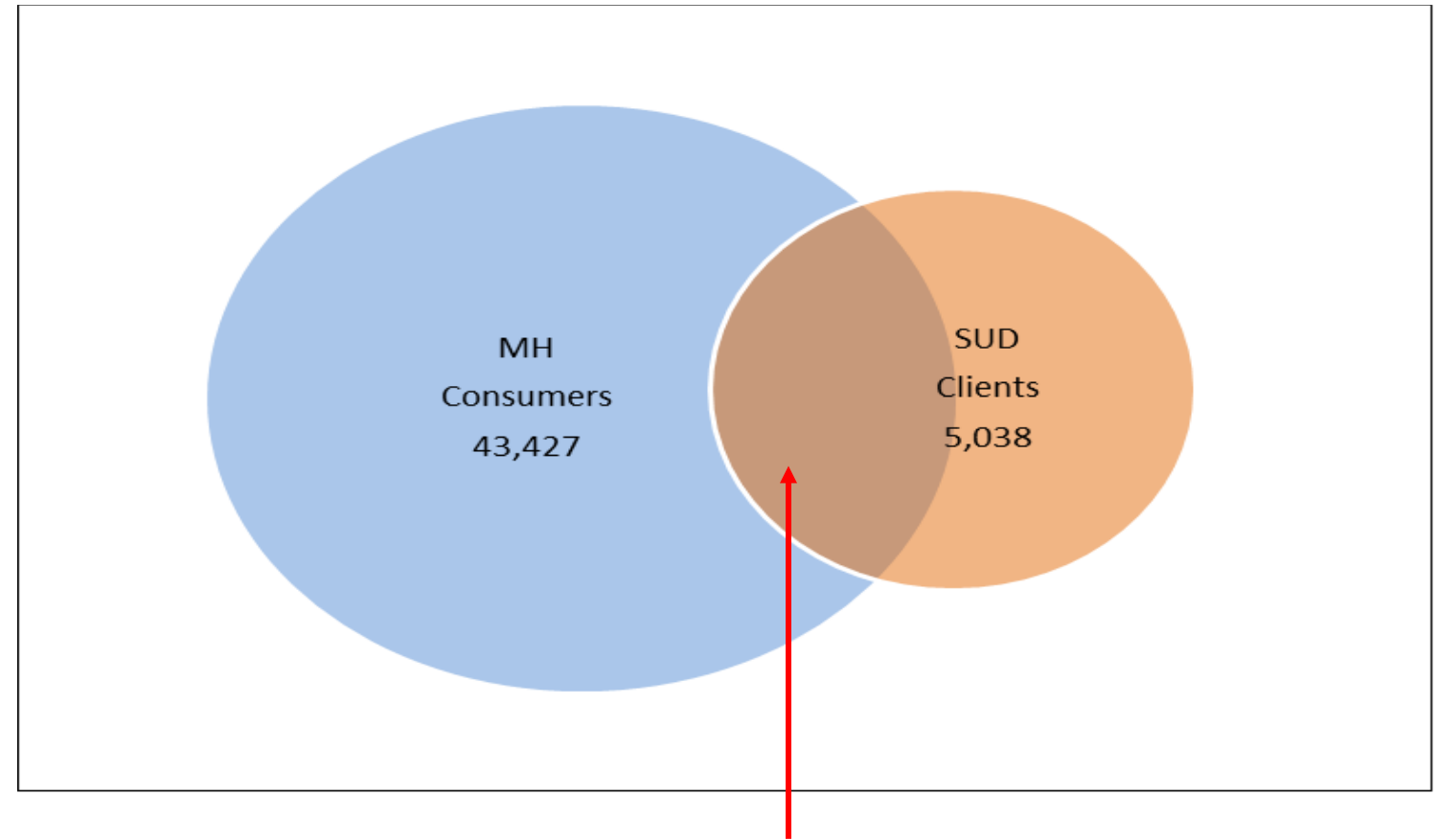
\$112 million to support Saint Elizabeths Hospital

\$21.7 million for crisis services for children and adults

Proposed FY 25 Budget Highlights

Mayor Bowser’s proposed budget for DBH addresses the increased need and ensures that residents can get connected to the care they need—by phone, at home, in school or in the community.

In FY 24, nearly **45,500 people** received behavioral health treatment through DBH.



3,014 with co-occurring mental health and substance use disorders.



Since the launch of the three-digit 988 Suicide and Crisis Lifeline in July 2022, calls have increased by **76 percent**.

\$17.3 million for increased utilization and continue rate increases for 22 services including nine evidence-based practices for children and youth.

\$4.9 million in local funds to stabilize funding for the Community Response Team, crisis services, and Intensive Care Coordination with the end of ARPA funding.

\$4.3 million for contractual obligations related to collective bargaining agreements and overtime costs within Saint Elizabeths Hospital.

\$2.5 million for CPEP to support 10 FTEs

\$1.8 million for additional services at 25 schools with the highest needs, and

\$600,000 to continue three targeted behavioral health outreach pilots in Wards 1, 5 and 7

Proposed FY 25 Budget Increases Investing in Priorities

\$11.6 million to realign community support to reflect utilization trends. Upon enrollment, everyone will receive automatically 200 units or 50 hours of community support for a 180-day period. Additional support based on clinical standards

\$5.9 million reduction in fixed costs and telecommunications.

\$4.8 million in the school-based program savings. The savings are funds that have gone unused for schools that have never been matched with a community-based organization and schools where CBOS have been unable to recruit a clinician.

\$2.1 million due to vacant FTEs.

\$922,833 with the discontinuation of Urgent Care Clinic located at DC Superior Court due to low utilization.

Proposed FY 25 Decreases to Achieve Savings

Intensive Care Coordination

\$820,000 to support intensive care coordination for most vulnerable residents

\$1.7 million to support tenants who live independently to help them maintain stability, avoid crisis calls, and integrate into the building



Public Health Approach to Public Safety

- **Prevention and Trauma Support:** Community and school-based prevention programs such as anger management, violence prevention, and anti-bullying, and trauma support for children and families.
- **Juvenile Behavioral Diversion Program:** Voluntary mental health treatment program in the DC Superior Court Juvenile Division for eligible youth 18 years old or younger instead of prosecution.
- **DC Prevention Centers:** Build youth leadership and provide resources to support a drug-free community.
- **988 Suicide and Crisis Lifeline:** Free telephone support by a crisis counselor, and onsite if needed. No enrollment.
- **Emergency Mobile Crisis Support for adults, children and youth:** Crisis and emotional support at home, in school, or the community.
- **Community Response Team:** On the spot counseling, grief counseling, and community support in the aftermath of tragic events.
- **Joint MPD/DBH Training:** Mandatory Mental Health First Aid training for all officers and Crisis Intervention Officer training.



Combating the Opioid Epidemic

\$36 million in the State Opioid Response Program Live.Long.DC which supports evidence-based prevention, harm reduction, treatment, and recovery strategies to fight the opioid epidemic.

\$14 million for the Opioid Settlement Fund in anticipation of additional revenue. While the dollar amount may change, the authority will allow us to spend once the budget is approved.

Driven by the deadly synthetic fentanyl, **the disease of opioid addiction and misuse** claimed 518 overdose deaths in 2023—the majority were DC residents and most in their own homes or the homes of family and friends.

During 2023, Fire and EMS and community partners report about **8,500 suspected overdose reversals** using naloxone— hundreds and hundreds of lives saved, often the lives of people who had no idea their drugs contained fentanyl.

We are steadfast in our resolve to reduce opioid use and related deaths



\$17.3 million for local matching funds to support Medicaid eligible behavioral health services with rate increase and new services for a total of nearly \$53.9 million. This amount will support nearly \$180 million in total services when matched with federal dollars.

DBH will realign community support to reflect utilization trends. Upon enrollment, everyone will receive automatically 200 units or 50 hours of community support for a 180-day period. Another 200 units will be automatically granted with an updated treatment plan. Currently, 90 percent of consumers use less than 400 units a year. Additional units will be granted based on clinical guidelines.

Supporting Provider Network



Notes on DBH Budget



- ❖ **KC (DCFPI):** How will people at the Court be connected and reconnected with core service agencies or other community mental health agencies in other jurisdictions when they are cycling in and out of the legal system if the Urgent Care Clinic isn't funded? Also, who/how will FD-12s be completed?
- ❖ **CR (Pathways):** The cut of the Urgent Care clinic is deeply concerning. The contract requires 600 people served annually. The Court Urgent Care Clinic is on pace for 630 unique referrals, 762 assessments, and 3,878 follow up visits for the year ending September 30, 2024. There are no plans in place to replace these services other than to use existing CSAs and programs in the community. If that worked for this population, they would not have fallen out of care. The justification to defund by DBH is not accurate according to the contract requirements. Deep concern is that without this resource people are just going to cycle more through the court system.
 - **RB (DBH):** Can't answer amount next steps and how we will handle the loss. We know a lot stakeholders are very concerned about this. We know this might shift problems other places.

Notes for DBH



- ❖ **LA (FP):** You mentioned funding 48 of 54 FTEs in connection with the Community Response Team. Are these all responders? Or are they distributed among other functions?
 - **RB (DBH):** Federal ARPA dollars were used to create 54 expansion positions across DBH's Access HelpLine, the Community Response Team, and Intensive Care Coordination program. We have vacancies that we are working hard to fill across all 3 programs. With ARPA funding ending, we are pleased that local dollars are now needed committed in the FY25 budget to fund 48 of those 54 positions. All are front line responders, call takers or care coordinators.

- ❖ **RW (PFFC):** Funds targeted for 1700 people receiving housing. Hoping that people will recognize that housing is healthcare and that you will be utilizing these budgets so that people are getting housed. We need to evaluate the housing supportive services. We want to make sure we are getting the most out of our money. People are still dying in housing.
 - **RB (DBH):** DBH needs to take a bigger role for people in the transition period from homelessness to housing. Investments are being made in care coordination. We don't think we are the best at housing and managing subsidies. So talking about how we can do better and more of what we are positioned to do. Better ways to partner. Most of the 28.9 M is continued spending on the DBH voucher, CRFs, some is new funding for people in scattered site. The most relative is the matched funding of 53.9 m. Is supporting increased care.

Notes on DBH Budget



- ❖ **CS:** Can you explain the changes to school based behavioral health funding?
 - **RB (DBH):** this happened through vacancies, no one is losing services. Capping program where it is now.
- ❖ **ML:** The school behavioral health grant amount per school is reduced \$9K. That's not vacancy savings. It's a reduction of the base grant amount.
 - **RB (DBH):** Can't elaborate further here but will take it back.
- ❖ **AS (EH):** Can you share more about the \$28.9M to maintain supported housing for 1,700 residents?
- ❖ **JC:** That is a lot of money to see so many of our people messed up. I don't think anyone can say I am the only one that see this. I do not want to see this continuing with excuses from DBH.
- ❖ **FR:** What's the difference btw CRT and Emergency Mobile Crisis support?

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DC Health Budget Overview

FY25

#FairShot: Strategic Investments and Shared Sacrifice

DC Health Presentation to ICH

APRIL 17, 2024

Our Guiding Principles for Budget Formulation

- 1. Reduce health disparities and advance health equity**
- 2. Community inclusion**
- 3. Identify process improvements for core functions**
- 4. Improve data capacity and data use**
- 5. Develop or redesign services to meet unmet or emerging needs**

Proposed FY 2025 Gross Operating Budget

\$304,828,997*--a slight increase over the FY 24 approved budget.

	FY 2023 Actual	FY 2024 Approved	FY 2025 Proposed	% Change from FY 2024
Operating Budget	\$288,696,544	\$292,128,607	\$ 304,828,997	4.3
FTEs	612.4	765.8	810.9	5.9
Capital Budget	\$249,296	\$493,483	\$22,756,239	4,511.3
FTEs	0.0	0.0	0.0	N/A

* Over 60% of DC Health’s budget is from federal grants and support.

\$25.1M for public school health program

\$4.7M for animal care and control program

\$5.4M for healthy food access programs

\$13.5M for WIC programs

\$3.2M for home visiting programs

\$3.8M for maternal health support

\$1.3M for high needs health careers scholarship

Proposed FY 25 Budget Highlights

Reduce health disparities and advance health equity

- 1. Move the Office of Health Equity into the central Office of the Director**
- 2. Create Equity Action Plans for each administration**

Proposed FY 25 Budget Increases Investing in Priorities

Community Inclusion

1. Hold quarterly summits at DC Health
2. Formalize regular community engagement

**Proposed FY 25
Budget Increases
Investing in
Priorities**

Identify process improvements for core functions

1. Onboard Chief Performance Officer
2. Speed up health licensing process

**Proposed FY 25
Budget Increases
Investing in
Priorities**

Improve data capacity and data use.

1. Onboard Chief Health Information Officer
2. Increase speed of data collection and reporting

Proposed FY 25 Budget Increases Investing in Priorities

Develop or redesign services to meet unmet or emerging needs

1. Environmental health

2. Health systems

**Proposed FY 25
Budget Increases
Investing in
Priorities**



Notes on DC Health



- ❖ **JC:** 3.8 million- Are these additional funds for maternal care or is this the total budget for the year for maternal health?
 - **CF (DC Health):** this is the supplemental program part and can provide more details this is not the total budget.

- ❖ **JC:** What about the health issues due to the people living in the streets? Do you have funding to support the homeless in the communities? Additionally, need to look at public transportation. People tend to sleep on public transportation. Looking at cooling and warming buses. How can we partner with the homeless community and teach about sanitation and health and not just give handouts.
 - **CF (DC Health):** There are some resources that we use to do outreach. It is much more targeted around sexual reproductive health. This is more about STDs, we also have HOPWA housing for people living with AIDS. We do want to see how we can better support our partners.

Meeting Agenda



- I. Welcome & Agenda Review (10 mins)
- II. DC Department of Behavioral Health (DBH) (25 mins)
- III. DC Health (25 mins)
- IV. DC Health Care Finance (DHCF) (25 mins)
- V. **Announcements & Reminders (5 mins)**
 - a) DBH: Notice of Funding Opportunity for DC Opioid Response ***NEW***
 - b) DC Council Budget Hearings ***NEW***
 - c) DHCD: Fair Housing Fridays ***NEW***
 - d) DHCF: 1115 Renewal Application Public Comments ***NEW***
 - e) DHS-FSA: Funding Opportunity: Youth Transitional Housing ***NEW***
 - f) DOC: READY Center
 - g) DPR: Summer Jobs ***NEW***
 - h) H3: First Aid & CPR Training and Health Fair ***NEW***
 - i) ICH: Budget Engagement Sessions
 - j) NHLC: Housing Not Handcuffs: Johnson v. Grants Pass Supreme Court Rally ***NEW***
 - k) Youth Homelessness Matters Day Event: Save the Date ***NEW***
- VI. Summary & Adjournment (as needed)

DBH: Notice of Funding Opportunity ***NEW***



The State Opioid Response Grant (SOR) team would like to announce two RFAs that will be posted on **Friday, April 12, 2024**:

- ❖ **District of Columbia Opioid Response 3 (DCOR3) Grant Opportunity: Faith-Based Prevention, Outreach and Recovery**
 - You can review the Notice of Funding Award for the faith-based grant opportunity at <https://dcregs.dc.gov/Common/noticedetail.aspx?noticeId=N135649>

- ❖ **District of Columbia Opioid Response 3 (DCOR3) Grant Opportunity: Recovery Residences with Intensive Care Management for Individuals with Opioid and/or Stimulant Use Disorder**
 - You can review the Notice of Funding Award for the Recovery Residences grant opportunity at <https://dcregs.dc.gov/Common/noticedetail.aspx?noticeId=N135650>

DC Council: Budget Hearings ***NEW***



Please find the schedule of all (*) Agency Partners and relevant hearings to the work of the ICH. For locations, online viewing, and to sign up to testify go to dccouncil.gov

DC Council Committee on	Agency	Date	Time
Housing	*Dept of Housing and Community Development	Mon., April 22 nd	9:30 AM – 6 PM
Executive Administration & Labor	Dept of Aging and Community Living *Dept of Employment Services (Government Witnesses)	Mon., April 22 nd	9 AM – 6 PM
Recreation, Libraries & Youth Affairs	*Dept of Public Library	Wed., April 24 th	9:30 AM – 6 PM
Facilities & Family Services	*Child and Family Services	Thurs., April 25 th	9 AM – 6 PM
Recreation, Libraries, & Youth Affairs	Dept of Youth and Rehabilitation Services	Fri., April 26 th	9 AM – 3 PM
Health	*DM Health and Human Services Dept of Health Care Finance	Mon., April 29 th	9:30 AM – 6 PM
Executive Administration & Labor	* Office of the City Administrator	Wed., May 1 st	9 AM – 6 PM
Housing	*DC Housing Authority	Thurs., May 2 nd	9 AM – 6 PM
Of the Whole	Committee of the Whole Hearing on FY25 Local Budget Act of 2024, FY25 Federal Portion Budget Request Act of 2024, FY25 Budget Support Act of 2024, FY24 Revised Local Budget Emergency Adjustment Act of 2024	Fri., May 3 rd	9:30 AM – 3 PM



DHCD: Fair Housing Fridays *NEW*



The Equal Rights Center (ERC) and the DC Department of Housing and Community Development (DHCD) are excited to partner to celebrate Fair Housing Month this April!

- ❖ The ERC and DHCD will be offering a series of exciting webinars each Friday this month on various important and emerging fair housing topics and trends.

Register now so you don't miss out!

- ❖ **April 19th**, 10 – 11 am: [DC Source of Income Protections for Individuals with Housing Vouchers](#)
- ❖ **April 26th**, 10 – 11 am: [Affirmative Fair Housing Marketing for Property Managers.](#)

DHCF: 1115 Renewal Application Public Comments



❖ Overview

- The Department of Health Care Finance (DHCF) intends to submit a five-year renewal request of the District of Columbia's Section 1115 Demonstration to the Centers for Medicare & Medicaid Services (CMS) for review and approval. DHCF is proposing to extend the current demonstration, focused on behavioral health, and implement an updated program design that broadens the focus to address social determinants of health. Accordingly, DHCF is proposing to rename the demonstration, "Whole-Person Care Transformation."

❖ DHCF has three proposed 1115 waiver renewal goals:

- Continue to maximize access to quality behavioral health services;
- Improve health outcomes during transitions to reduce health disparities and drive sustainable transformation through justice-involved reentry and health-related social need (HRSN) services; and
- Develop and maintain infrastructure to support the delivery of reentry and HRSN services.

- ❖ The proposed draft renewal application and other related materials are now available on DHCF's website:

<https://dhcf.dc.gov/1115-waiver-initiative>

- ❖ DHCF will accept **public comments** on the proposed renewal application from **April 1, 2024, through 6:00 PM on April 30, 2024**. Additional instructions on how to submit written comments, as well as information about three public hearings DHCF will hold during the comment period are available on the website.

- ❖ For further information, please contact DHCF at dhcf.waiverinitiative@dc.gov

DHS-FSA: Funding Opportunity: Youth Transitional Housing ***NEW***

Excited to announce we have just published 2 RFAs for the Youth Transitional Housing Program Grants.

LGBTQ Youth

Purpose of Grant: DHS and FSA are seeking applications to provide Extended Transitional Housing for youth through funding for Fiscal Year (FY) 2024. Extended Transitional Housing will provide up to three years of housing in addition to a full range of supportive services including case management, employment services, educational services, life skills, and housing navigation services. The goal of ETH programs is that after three years of support, youth will transition to permanent housing. DHS seeks to fund up to 75 ETH beds through this solicitation with 24 of the 75 beds being dedicated to LGBTQ youth.

Here's an overview of the RFA:

- Announcement Date: March 27, 2024
- RFA Release Date: March 27, 2024
- Pre-application Conference Date: April 3, 2024
- Application Submission Deadline: April 24, 2024, 5:00PM
- Total Estimated Number of Awards: Five
- Total Estimated Program Award Funding: Up to \$4,100,000.00
- Award Ceiling: \$1,785,000.00
- Award Floor: \$420,000.00
- Performance Period: October 1, 2024 – September 30, 2025

You can view both RFA's on the DC Clearinghouse here: <https://communityaffairs.dc.gov/content/community-grant-program>



DOC: Expanded Services at the READY Center

Expanded Services at the READY Center

The READY Center was opened by Mayor Bowser in 2019 to serve as a one-stop-shop where returning citizens can access a wide range of essential post-release services from District agencies and community-based organizations. So far in FY24, over 3,100 individuals released from federal and local custody have received a variety of pre- or post-release services from the READY Center.

Open 5 days a week from 9 am – 5 pm. The READY Center welcomes both scheduled appointments and walk-ins. The new location is at 3640 MLK Jr Ave, SE walk-in or call 202-790-6790 to schedule an appointment.

Services offered at the READY Center include:

- ❖ Streamlined Access to Identification/Vital Documents
- ❖ Public Benefit Application Assistance (TANF, SNAP, Medicaid)
- ❖ Subsidized and Unsubsidized Employment and Skills Training
- ❖ Education and Vocational Training Resources
- ❖ Referrals for Behavioral Health Services
- ❖ Financial Literacy Services
- ❖ Referrals for Substance Use Intervention
- ❖ Reentry Case Management and Support Groups
- ❖ Clothing and Essential Resources



DPR: Summer Jobs *NEW*




- ❖ Earn With DPR
- ❖ There are over 700 seasonal jobs now available with DPR.
Including:
 - Working at a Pool
 - Working at a School
 - Engaging Youth in the District
 - DPR's Environmental Division
 - Operations
 - Food Service
- ❖ Learn More at EarnWITHDPR.com




H3: First Aid & CPR Training and Health Fair *NEW*

The h3 Project & ACPM Present:




Street Docs A Health Fair For The People



Free For All! Featuring:




- Narcan Administration Training
- Hands-Only CPR
- Choking First Aid
- Health Screenings
- Food *
- Swag *
- ...And More!



**Quantities Limited to First 50*

MORE INFORMATION:

- 📅 April 17th, 2024. 2pm-5pm
- 📍 Columbus Circle, 50 Massachusetts Ave. NE (in front of Union Station).
- ✉️ Events@h3projectdc.org





THE H3 PROJECT & LEVEL UP: CPR/AED FIRST AID TRAINING

Hosted By: Lost Generation Brewing
327 S St. NE Washington DC

ENROLL IN OUR COMPREHENSIVE FIRST AID TRAINING PROGRAM AND GAIN THE KNOWLEDGE AND SKILLS NEEDED TO SAVE LIVES.

HERE'S WHY YOU SHOULD JOIN OUR TRAINING:

- ESSENTIAL LIFE-SAVING TECHNIQUES ✓
- EMPOWERMENT AND CONFIDENCE ✓
- COMPREHENSIVE CURRICULUM FROM EXPERIENCED INSTRUCTORS ✓
- 2 YEAR CERTIFICATE ✓

CONTACT US

- 📞 202-713-8056
- 🌐 INFO@H3PROJECTDC.ORG

Limited Spots! Come Learn With Us on 4/26 10a-3p

END CO

ICH Budget Engagement Sessions



Save the Dates!

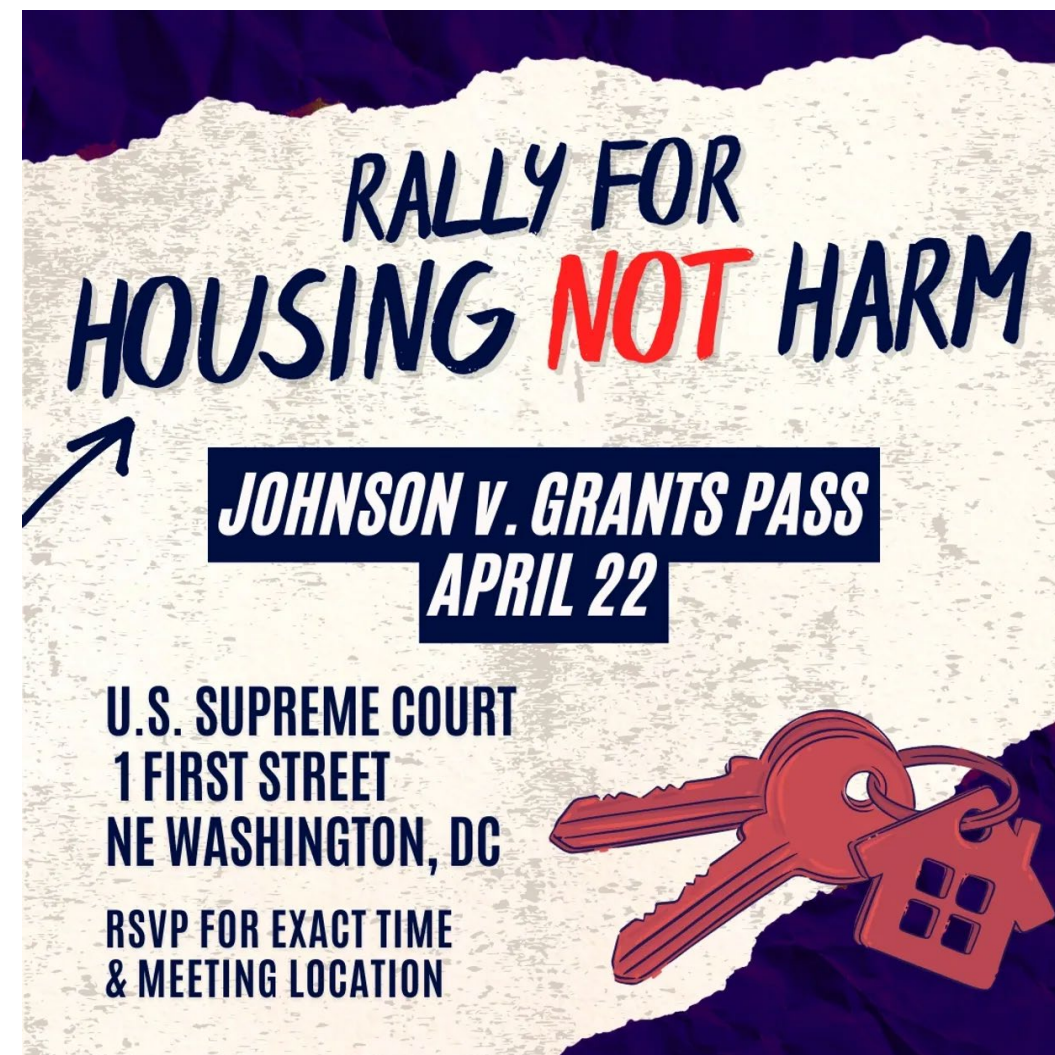
- ❖ The ICH is legislatively mandated at [DC Code § 4-752.02\(c\)](#) to comment on the Mayor's Proposed Budget.
- ❖ ICH is aiming to schedule all budget engagements and compile all comments by 04/19.
- ❖ ICH is also working with member agencies to share info on their other engagement opportunities.

Date	Time	Proposed Budget Presentations	Join the Meeting
04/09	10:30 – 12 pm	<ul style="list-style-type: none"> Focus on Level Setting & Cross-Cutting Resources ICH Members: OCA, DMHHS, & DOES 	<ul style="list-style-type: none"> Meeting Notes and Materials are available on ich.dc.gov
04/09	1:30 – 3 pm	<ul style="list-style-type: none"> Focus on Young Adults ICH Member: CFSA, DCPS*, DYRS*, & OSSE *Flag: DCPS and DYRS are members of the Youth Committee per ICH Bylaws 	<ul style="list-style-type: none"> Meeting Notes and Materials are available on ich.dc.gov
04/11	10:30 – 12 pm	<ul style="list-style-type: none"> Focus on Emergency Response & Shelter Operations ICH Members: DHS (Capital Budget), DGS & HSEMA 	<ul style="list-style-type: none"> Meeting Notes and Materials are available on ich.dc.gov
04/11	1:30 – 3 pm	<ul style="list-style-type: none"> Focus on Special Populations ICH Members: MOLGBTQA, MPD, and DOC 	<ul style="list-style-type: none"> Meeting Notes and Materials are available on ich.dc.gov
04/15	2 – 3:30 pm	<ul style="list-style-type: none"> Focus on Housing Solutions ICH Members: DCHA, DHS, & DHCD 	<ul style="list-style-type: none"> Meeting Link Join by phone: 202-860-2110 Meeting number (access code): 2305 671 8216 Meeting password: t4ETQCnpR72
04/17	3:30 – 5 pm	<ul style="list-style-type: none"> Focus on Health Care Resources ICH Members: DBH, DC Health, DHCF 	<ul style="list-style-type: none"> Meeting Link Join by phone: 202-860-2110 Meeting number (access code): 2312 589 2778 Meeting password: SRn9aSh4i54

NHLC: Rally for Housing Not Harm



- ❖ Join National Homelessness Law Center, National Coalition for the Homeless, and other partners to **Rally For Housing Not Harm**.
- ❖ Johnson v. Grants Pass is the most significant Supreme Court case about homelessness in decades. At its core it will decide whether cities can arrest and fine people for things like sleeping outside with a pillow or blanket, even when there are no safe shelter options.
- ❖ The rally will feature homeless activities, organizers, and advocates speaking on the impact of this case.
- ❖ The **Rally for Housing Not Harm** will be on **April 22nd** at the US Supreme Court, 1 First Street, NE, Washington, DC.
- ❖ RSVP for exact time and meeting location at: [Attend the Rally | Johnson v. Grants Pass](#) (johnsonvgrantspass.com)



In Recognition of Youth Homelessness Matters Day

You Know Expo

April 17th from 2:00 – 6:00 pm

Zoe's Doors 900 Rhode Island Ave, NE

All young adults
aged 18 – 24 are
welcome!



- Food and Fellowship
- Resources & Services
- Raise Awareness
- Support Advocacy

SHYAB | YOUTH ACTION BOARD

ICCH
INTERAGENCY COUNCIL
ON HOMELESSNESS

DC DEPARTMENT OF
HUMAN SERVICES

WE ARE WASHINGTON
GOVERNMENT OF THE
DISTRICT OF COLUMBIA
MURIEL BOWSER, MAYOR

Meeting Agenda



- I. Welcome & Agenda Review (10 mins)
- II. DC Housing Authority (DCHA) (20 mins)
- III. Department of Housing & Community Development (DHCD) (20 mins)
- IV. Department of Human Services (DHS) (40 mins)
- V. Announcements & Reminders (as needed)
- VI. **Summary & Adjournment (as needed)**
 - a) **Opportunity to continue engaging with DHS budget** – DHS has a budget briefing for Fair Budget Coalition & DCFPI for tomorrow at 10am, 04/18 – look out for details via email.
 - b) **Extending deadline for written comments** – Quick show of hands to see if anyone would benefit from an extra day to submit written comments? Based on feedback that at least one Full Council members would benefit, extending the deadlines for written comments to COB Friday (04/19).

