Budget Savings Options 2025

Dollars in Thousands

Agency: Department of Health

Agency Priority H, M, L	Impact 1-5	Program/Activity	GF-S					Other Funds					FTE Change					Brief Description and Rationale	Effective Date (MM/YY)	Impacts of Reductions and Other Considerations	Law/Reg. Change Required (cite)
			FY 25	FY 26	FY 27	FY28	FY 29	FY 25	FY 26	FY 27	FY28	FY 29	FY 25	FY 26	FY 27	FY28	FY 29				
		Management Reductions		2022	2211	2211	2211		5090	6607	6607	6607		55	55	55	55	These are reductions to management positions across the agency at all levels of the organization.	7/25	Impacts of these reductions require reorganization of agency executive offices to achieve these reductions and in some instances increasing the number of direct reports to another manager. Agency services and program operations would be impacted by these management reductions which result in delay of agency operations support, reduced program services, and/or elimination of services.	
		Administrative Reductions	249	1355	1355	930	930	810	3891	3297	3297	3297	8.46	32.5	30.5	28.5	28.5	These are reductions to administrative services for the agency.	7/25	Impacts of these reductions require reogranization of agency executive offices to achieve these reductions. Agency services in support of program operations would be impacted by the delay of support services, reduced resources for agency operations, and/or elimination of services.	
		Program Services																			
L	1	Be Well WA	1500										3					New initative - No long term funding therefore discontinue promotion and implementation.	3/25	One-time funding	
L	1	Partnerships	0	0	0	0	0	187	231	231	231	231	1.5	2	2	2	2	Reduced capacity for agency partnership coordination.	3/25	Reduced resources for partnership coordination.	
L	1	Proviso Underspend	317	0	0	0	0	100	0	0	0	0	0.5	0	0	0	0	Savings from projected underspending of proviso funding.	2/25		
H	1	Medical Logistics	1300	1100	1100	1100	1100											Current warehouse space exceeds business need for our medical logistic services.	2/25	Reduced space would still allow services to be provided.	
H	3	Stipend Program	145	3488	3788								0.5	2	2			Proviso for launch of Behavioral Health Stipend program stand up and ongong savings. This stipend program would provide financial assistance to behavioral health apprentices and supervisors.	2/25	Provision of stipends aim to reduce barriers to licensure and improve professional growth for mental and behavioral health providers. However, this is a new program that was not fully funded and was still in the early planning and development phase. We have not started issuing stipends yet.	Yes
L	3	Electric vehicle	24	47	47	47	47						0.25	0.25	0.25	0.25	0.25	Enables participation in council run by Dept of Comm. Council provides support for community engagement with vulnerable and overburdened communities	2/25	Commerce could continue the work without DOH participation	Yes Bill Number: S-4216.1
L	1	Behavioral Risk Factor Surveillance	85	85														Currently BRFSS sends physical mailings to recruit participants for survey participation. It is not clear that these improve survey participation, given other recruitment efforts. Cost savings is estimated given federal funding and contract funds are based on a calendar year. If successful could eliminate activity and extend savings to next calendar year.	2/25	Could affect participation rates of BRFSS Survey, and potentially differentially by geography or demography. BRFSS is the only source for most state- and county-level surveillance measures of chronic disease, behavioral health practices, and many other health behaviors and conditions.	

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			FY 25	FY 26	FY 27	FY28	FY 29	FY 25	FY 26	FY 27	FY28	FY 29	FY 25	FY 26	FY 27	FY28	FY 29				
L	3	Death with Dignity		38	38	38	38						0.15	0.15	0.15	0.15	0.15	The Death with Dignity Program is required by statute but is significantly underfunded. DOH is required to collect mandated forms, ensure completeness, and produce an annual report.	7/25	This would completely eliminate DOH's role in the Death with Dignity Program. We currently supplement the program with internal fee dollars. We cannot sustain this. Without additional supplemented money, the $38K per year is not sufficient to meet any of the mandated activities.	
L	1	Music Therapy	50															Music Therapist Proviso ends in 2025. One time savings	7/25	License has been implemented - pause on any additional work i.e., advisory committee.	No change
L	1	Diabetes Prevention Report		38	38	38	38							0.3	0.3	0.3	0.3	End DEAR Report. This funding supports the Diabetes Epidemic Action Report (DEAR), and funds a small amount of Epidemiology staff.	7/25	This is a mandated report that has been updated every 2-3 years since 2014. While helpful to have this data compiled, the program is unaware of any usage of the report at the legislative level.	
L	2	Opioid Communication Campaign		394	394	394	394											Do not start Spanish language opioid campaign. This funding supports a communications campaign for opioid prevention among the Spanish-speaking population.	7/25	There are other opioid campaigns statewide that are now funded through settlement funding. The campaign prep work has not yet begun. Very limited impact since the campaign development hasn't started.	

Priority:

L = Low priority agency activity or program
M = Medium priority agency activity or program
H = High priority agency activity or program

Impact:
1 = Allows continuation of the program/activity at a reduced level
2 = Eliminates the ability to perform program objectives
3 = Eliminates agency function
4 = Long term implications (moves the problem to next biennium)
5 = Short term (reduction to one time increase)