

Early Budget Work Session FY 2026-2027 Preliminary MOE Budget

Aneeka Chaudhry, Director



FY 2026-2027 Budget Summary* (in millions)

| | FY 25-26 Approved Budget | FY 26-27 Preliminary MOE Budget | Change from FY 25-26 Approved to FY 26-27 MOE | |
|------------------------|-----------------------------|---------------------------------------|--|----------------|
| | | | Amount | Percentage |
| Appropriations | \$1,342.68 | \$1,369.07 | \$26.39 | 1.97% |
| Revenue | \$1,148.28 | \$1,166.09 | \$17.81 | 1.55% |
| Net County Cost | \$194.40 | \$202.98 | \$8.58 | 4.41% |
| FTE-Mgmt | 839.58 | 832.57 | (7.01) | (.83)% |
| FTE-Non-Mgmt | 1,083.82 | 1,069.82 | (14.00) | (1.29)% |
| Total FTE | 1,923.40 | 1,902.39 | (21.01) | (1.09)% |

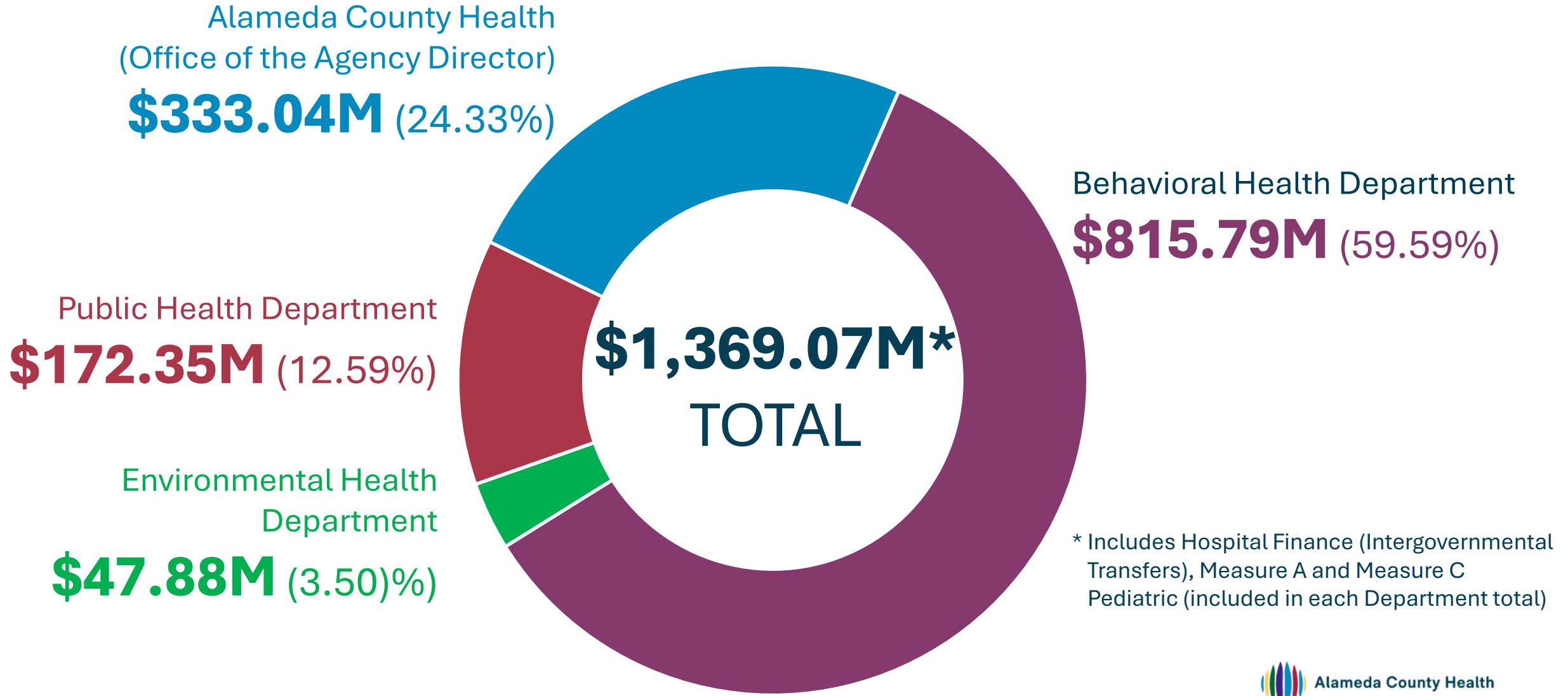
* Preliminary Maintenance of Effort (MOE) Budget Appropriation includes: Vector Control (\$9.40M) & EMS Special District (\$30.96M) = \$40.36M; Hospital Finance = \$60.34M; Measure A (non-AHS) = \$52.16M; and Measure C (Pediatric) = \$12.96M.

Change in AC Health FTE (Full-Time Equivalents) by department: AC Health (0.00); ACBHD (-21.00); ACEHD (0.00); ACPHD (-0.01)

Major Components of Net County Cost (NCC) Change (in millions)

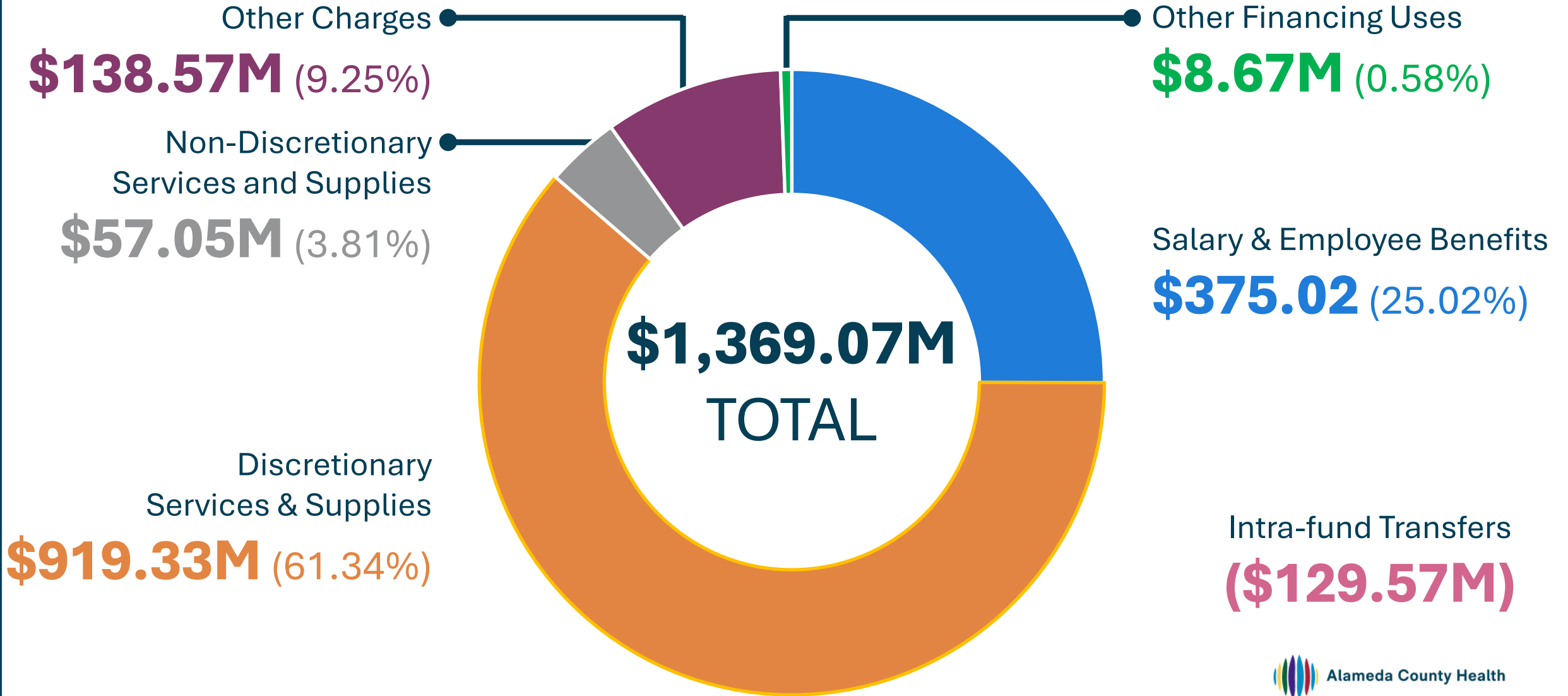
| Component | NCC Change |
|---|---------------|
| Salary & Employee Benefits Cost-of-Living Adjustments (COLAs) | \$10.38 |
| Community-Based Organization Cost-of-Living Adjustments (COLAs) | \$3.39 |
| Internal Service Funds (ISF) Adjustments | \$1.90 |
| County Counsel Charges | -\$0.13 |
| Loss of One-Time Revenue | \$0.63 |
| Revenue Adjustments | -\$7.59 |
| TOTAL | \$8.58 |

Appropriation by Department

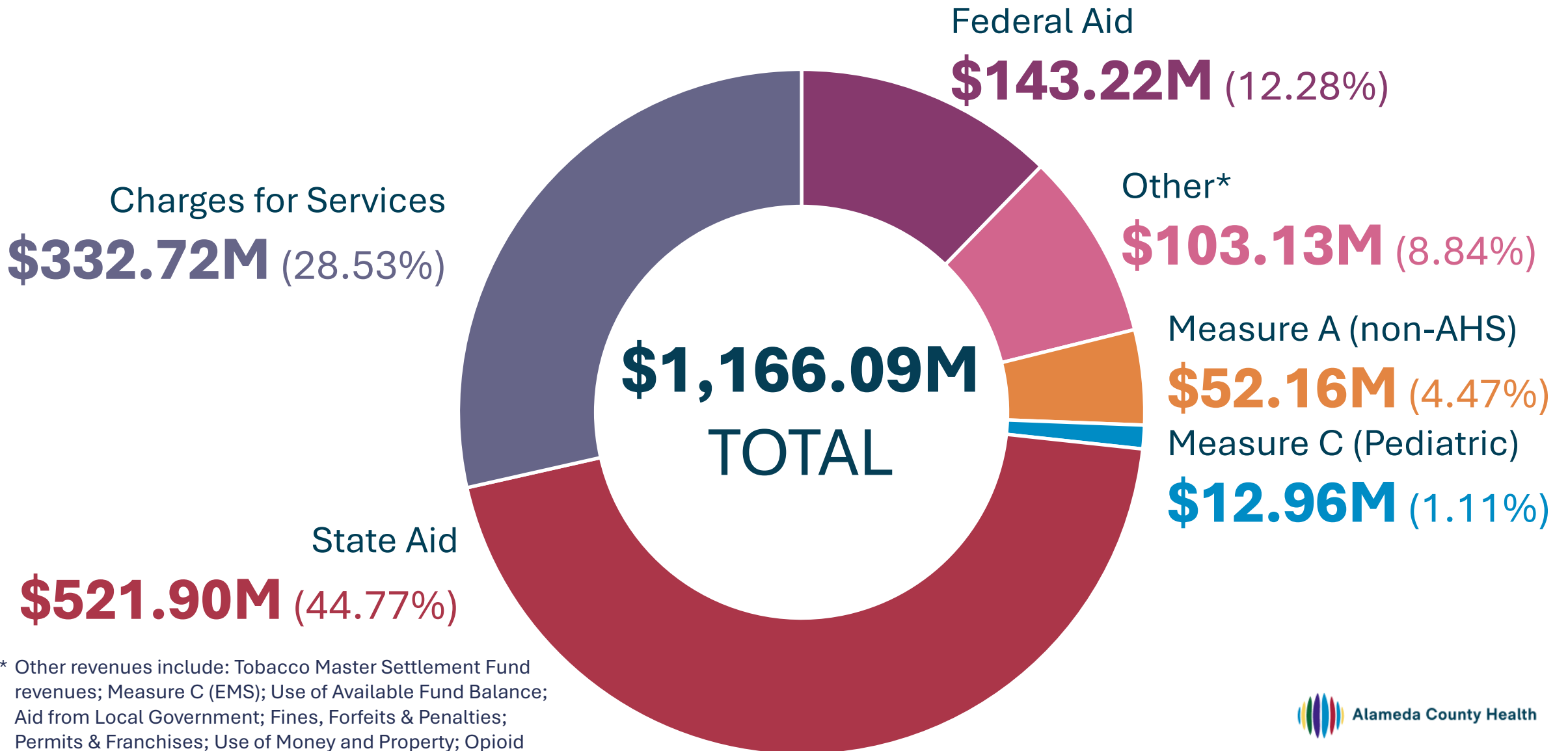


* Includes Hospital Finance (Intergovernmental Transfers), Measure A and Measure C Pediatric (included in each Department total)

Total Appropriation by Major Object



Total Financing by Source



* Other revenues include: Tobacco Master Settlement Fund revenues; Measure C (EMS); Use of Available Fund Balance; Aid from Local Government; Fines, Forfeits & Penalties; Permits & Franchises; Use of Money and Property; Opioid Settlement Funds, and Other Financing Sources

Vision

All Alameda County residents live healthy and fulfilling lives

Mission

Achieve health equity by working in partnership to provide high quality services, foster safe and healthy communities, and promote fair and inclusive opportunities for all residents



Vision 2036 Alignment

Shared Visions: Thriving and Resilient Population, Safe and Livable Communities, Healthy Environment, Prosperous and Vibrant Economy

10X Goals: Health for All, Eliminate Poverty & Hunger, Employment for All, Crime Free County, Accessible & Integrated Infrastructure



FY 2024-2025 Key Accomplishments

- ★ Served **25,000+ individuals** through Housing & Homelessness Services, added **434 new permanent supportive housing opportunities**, and decreased systemwide rate of returns to homelessness from 16% in FY 23-24 to 13% in FY 24-25.
- ★ Successfully implemented CARE Court through county-wide interagency coordination with **280 individual petitions** for supported treatment.
- ★ Launched nearly **\$2M in community-driven innovative programs** funded through Alameda County's Opioid Settlement dollars.
- ★ Ensured **56,775 households** and **660 small businesses** participated in proper hazardous waste disposal.
- ★ EMS warehouse supported over **1,000 unique medical and healthcare entities**, processing over **467 resource requests**.
- ★ Served **15,000 children and youth** through health and health education services across **28 School Health Centers**, totaling **57,000 clinic visits**.
- ★ Launched the **Public Health Front Door** referral system for Asthma Remediation, improved **Recipe4Health data management**, and strengthened agency-wide systems for **Medi-Cal billing and reporting**.
- ★ Provided **1,200 older adults** with health navigation services, assistance with advance care directives, durable medical equipment, or dementia support.

Key Investments for FY 2026-2027 (in millions)

| Component | FY 26-27 APP* | FY 26-27 NCC | FTE |
|---|---------------|--------------|--------|
| Housing and Homelessness Services (Countywide Investment)** | \$124.65 | \$6.44 | 124.00 |
| Health Program of Alameda County (HealthPAC) | \$85.32 | \$68.92 | 17.00 |
| Public Health Foundational Capabilities | \$67.90 | \$37.14 | 335.00 |
| CARE Court Implementation | \$44.80 | \$0.00 | 13.00 |
| Environmental Health Services | \$35.83 | \$1.59 | 147.60 |
| Forensic Plan*** | \$35.70 | \$0.00 | 0.00 |
| EPIC Electronic Health Record (EHR) Implementation | \$17.11 | \$0.00 | 1.00 |
| Measure C Pediatric | \$12.96 | \$0.00 | 12.80 |
| Vector Control | \$9.40 | \$0.00 | 30.00 |
| Public Health Accreditation | \$7.49 | \$5.84 | 38.00 |
| CaAIM Community Supports and Enhanced Care Management | \$6.20 | \$0.63 | 11.00 |
| Community Health Improvement Implementation Plan | \$5.46 | \$4.26 | 28.00 |

*Includes funding for CBO provider contracts and County staff.

**Includes funding from other County Departments but does not include Measure W Home Together Funds.

*** Overlaps with ACBHD litigation agreements.

Mandated Services

APP \$867.8M

(NCC \$154.2M Estimate)

| | | | |
|----------|--|----------|--|
| \$148.3M | Behavioral Health Services Act* | \$1.2M | Land Use/Septic |
| \$27.8M | County Behavioral Health Litigation Agreements | \$55.8M | Maternal Child & Family Health |
| \$44.8M | CARE Court* | \$5.0M | Medical Services to Youth in Custody |
| \$1.5M | Children’s Dental Care | | Medicaid |
| \$14.2M | Chronic Disease & Injury Prevention (e.g., Food Security, Violence Prevention) | \$0.9M | CaAIM Implementation |
| \$0.6M | Clean Water | \$136.8M | Early and Periodic Screening, Diagnostic and Treatment (EPSDT) Services for Children/Youth |
| \$35.0M | Communicable Disease Control | \$137.1M | Services for Serious Mental Health and Substance Use* |
| \$46.4M | Crisis Intervention and Support* | | |
| \$29.9M | Emergency Medical Services | \$39.1M | Subacute Mental Health Services |
| \$13.5M | Food/Water/Recreational Safety | \$0.2M | Pharmaceutical Safe Take Back |
| \$5.5M | Hazardous Materials/Waste Management | \$1.2M | Solid/Medical Waste |
| \$8.3M | Health Safety, Education, & Investigations | \$9.4M | Vector Control |
| \$7.3M | Household Hazardous Materials Collection | \$0.8M | Vital Registration |
| | Indigent Care | | |
| \$11.9M | Indigent Care (1991 Realignment) | | |
| \$85.3M | Indigent Care (Health Care for Low-Income Uninsured/Health Insurance Enrollment) | | |

*Additional BHSA funding is reflected in CARE Court, Crisis Intervention and Support and Medicaid for Services for Serious Mental Health and Substance Use.

Discretionary Services

APP \$302.8M

(NCC \$19.5M Estimate)

| | |
|----------|---|
| \$6.2M | CalAIM Enhanced Care Management & Community Supports |
| \$1.1M | Court Appointed Special Advocates |
| \$0.2M | Developmental Disabilities Planning and Advisory |
| \$0.3M | Environmental Complaints |
| \$0.1M | Environmental Educational Outreach |
| \$17.1M | EPIC Electronic Health Record (EHR) Implementation |
| \$35.7M | Forensic Plan |
| \$0.7M | Health Inspections for Schools, CBO, and other non-profits |
| \$124.7M | Housing & Homelessness Services |
| \$60.3M | Intergovernmental Transfer Programs |
| \$1.8M | Medi-Cal Administrative Activities/Targeted Case Management |
| \$8.6M | Opioid Settlement |
| \$9.8M | Public Health Nurse for Abused Adults |
| \$23.2M | School Health Services & Youth Centers |
| \$13.0M | Social Health Information Exchange |

Productivity & Revenue Enhancement Strategies

Resource Leveraging

Seek opportunities to leverage and maximize all funding sources and internal agency infrastructure

Data-driven Decisions

Use data and Results-Based Accountability framework for decision making and performance measurement

Efficient Contracting

Align agency business processes to reduce time and duplication, and support community-led efforts

Quality

Quality assurance, quality improvement, and best practices to strengthen core operations to better serve communities

FY 26-27 Community-Based Organization Contracts

| Category | No. of Contracts | Amount |
|--|------------------|------------------|
| Mental Health | 65 | \$380.54M |
| Alameda Health System (AHS) | 15 | \$138.72M |
| Substance Use | 1 | \$2.26M |
| Emergency Medical | 3 | \$5.66M |
| Health Care for the Homeless | 3 | \$1.98M |
| HIV/AIDS Services | 4 | \$0.82M |
| Indigent Health | 2 | \$45.09M |
| Mental Health | 1 | \$82.82M |
| Obesity Prevention | 1 | \$0.08M |
| Substance Use | 18 | \$57.30M |
| HealthPAC Clinics – Indigent Health | 14 | \$32.25M |
| Housing and Homelessness Services | 144 | \$140.93M |
| Other CBO Contracts | 152 | \$44.46M |
| TOTAL | 408 | \$794.19M |

FY 26-27 Federal & State Pending Factors

- Implementation of H.R. 1 and State Medi-Cal Changes
- Behavioral Health Services Act (Proposition 1) Transition
- Medi-Cal Mobile Crisis Benefit
- Public Health Funding
- Data Sharing & Reporting Infrastructure
- Workforce Stability & Federal/State Workforce Policies
- Homelessness Funding (e.g., State HHAP and Federal HUD)
- Federal Grants and Regulatory Actions Affecting County Programs

Thank you & Questions



★ <https://health.alamedacountyca.gov>