Public Investments in Children, Youth and Families in the Southwest Ohio Counties of Butler, Clermont, Clinton, Preble & Warren

A Fiscal Survey for The Engage 2.0 Southwest Project

Cradle to Career, Behavioral Health & Early Childhood Fund Mapping: Fiscal Years 2015, 2017 & 2019 & FY 2021 Update

> October 2023 Prepared by David McNear McNear Fiscal Surveying

Fund Mapping Review

- Introduction & Background
- Review of Behavioral Health Fund Map
- Overview of Cradle to Career Investments
- Review Early Childhood Fund Map

Engage 2.0 Fund Maps Background

- The Ohio Department of Mental Health and Addiction Services, in collaboration with the Mental Health and Addiction Services Board of Lucas County and the Butler County Mental Health and Addiction Recovery Services Board, received a System of Care (SOC) Expansion and Sustainability Cooperative Agreement from the Substance Abuse and Mental Health Services Administration (SAMHSA).
- The federal grant from SAMHSA supports the Engage 2.0 Project's cross-system efforts to improve behavioral health outcomes and enhance family supports for children and adolescents in Northwest and Southwest Ohio who are experiencing serious emotional disturbances and other behavioral health challenges.
- Participating counties in Southwest Ohio are Butler, Clermont, Clinton, Preble, and Warren Counties.
- With support from SAMHSA, the Butler County Educational Service Center contracted to conduct a two-phase regional cradle to career and behavioral health fund mapping project in the Southwest Ohio participating counties.

Engage 2.0 Fund Maps Background

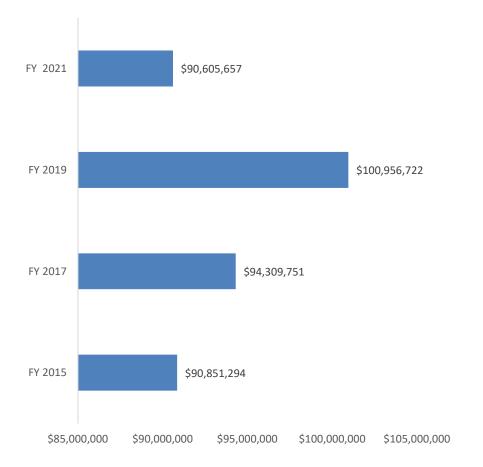
- The Engage 2.0 Southwest Fund Maps include:
 - 1. a behavioral health fund map, or a regional review of public investments in children and adolescents under age 18 with behavioral health challenges;
 - 2. a regional cradle to career fund map, or a fiscal survey of public spending on children and youth under 18; and
 - 3. an early childhood fund map, or an inventory of regional investments in children under age 5.
- Phase One was completed in September 2021 and included data and analysis for FYs 2015, 2017 and 2019. Phase Two comprises this update with FY 2021 data.
- With a start date of late 2019, the COVID pandemic had an impact on both the process and the outcome of the project. COVID work disruptions in school districts and state and county agencies delayed responses to project data requests and pushed back the completion of the Phase One report.
- With three years of Phase One pre-pandemic spending data, this update surveys the budgetary impact of the societal shifts during the pandemic and the regional effects of the federal government's fiscal response to COVID, including a surge of federal funds for the Supplemental Nutrition Assistance Program (SNAP) and to support K-12 Education.

ENGAGE 2.0 REGIONAL BEHAVIORAL HEALTH FUND MAP

Regional Investments in Behavioral Health Programs and Services

Regional Behavioral Health Investments on Children and Adolescents

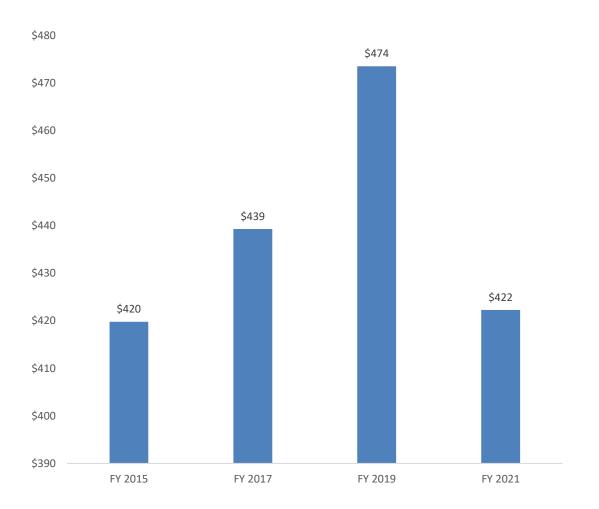
Regional Behavioral Health Investments



- After increasing \$10.1 million, or 11.1%, from FY 2015 to FY 2019, regional behavioral health investments were down \$10.3 million, or 10.3% in FY 2021.
- Spending decreased 0.3% throughout the survey period from FY 2015 to FY 2021.
- The fiscal effects of the COVID pandemic drove the FY 2021 decrease, as Medicaid behavioral health spending dropped by \$23 million, or 50.5%.
- Non-Medicaid spending, like school psychologists or community mental health services, increased \$29.2 million (75.1%) over the survey period.
- Behavioral health investments accounted for 3.1% of total cradle to career spending in FY 2021, down from 3.9% in FYs 2015, 2017 and 2019.

Regional Behavioral Health Spending Per Child Under Age 18

- Regional per child
 behavioral health spending
 grew by \$54, or 12.8%
 between FY 2015 and FY
 2019, going from \$420 to
 \$474.
- Driven by the decrease in Medicaid spending, per child spending dropped \$51 (-10.8%) in FY 2021 to \$422.
- The cumulative per child spending growth was \$3, or
 0.6%, from FY 2015 to FY
 2021.



Regional Behavioral Health Investments by County



• Variabilities in Medicaid charges and spending on school-based behavioral health services partially account for trends in county spending through the survey period.

• K-12 behavioral health spending is 53.8% of FY 2021 behavioral health investments. The fund map includes behavioral health spending in 27 of 36 regional non-JVSD school districts that either had available data online or responded to a fund mapping information request. Variations in districts with data included in the fund map across counties partly account for the variations among county spending.

• Despite the drop in FY21, Medicaid charges are 24.9% of FY 2021 behavioral health investments. Eligibility for Medicaid is based on income; and differences in the relative wealth of counties in the region also partly account for differences in spending across counties.

Regional Behavioral Health Spending By Setting

• More than 85% of behavioral health investments were either school-based services or home/community-based services.

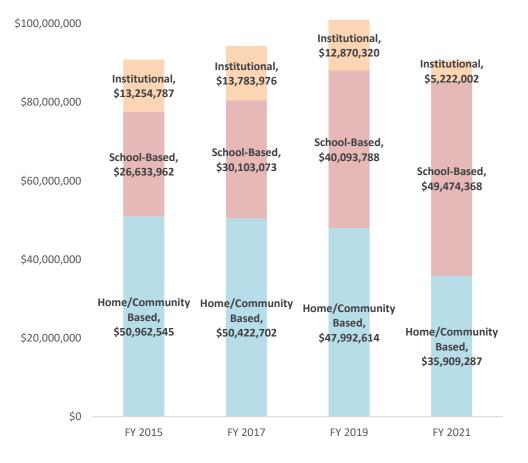
• Due in part to the effect of the COVID pandemic, spending on school/home-community-based services grew from 87.2% of total behavioral health spending in FY19 to 94.2% of spending in FY21.

• After being relatively stable from FY15 to FY19, home/community-based spending decreased \$12.1 million, or 25.2%, between FY 2019 and FY 2021, due to the drop in Medicaid behavioral health spending.

• With the surge of federal COVID relief funds to K-12 education and decreased Medicaid reimbursements, behavioral health investments shifted to school-based spending. School-based services accounted for 29.3% of behavioral health investments in FY15 and grew 54.6% of total spending in FY21.

• Institutional investments were 14.6% of total spending in FY15 and were down to 5.8% in FY21. Institutional spending went down by 2.9% from FY 2015 to FY 2019, and dropped by 59.4% in FY 2021, due to a \$8.6 million decrease in spending on psychiatric hospitalization.

\$120,000,000



Regional Behavioral Health Investments by Subfunction

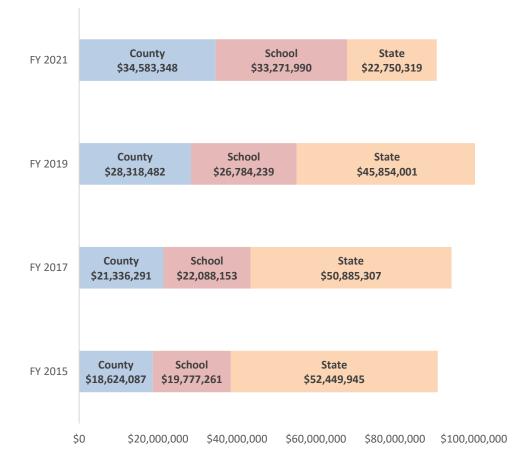
Subfunction	FY 2015	FY 2017	FY 2019	FY 2021
Behavioral Health Staff/Administration	\$3,699,834	\$3,094,559	\$3,266,718	\$3,394,753
Early Childhood Behavioral Health	\$112,670	\$256,257	\$308,157	\$0
Juvenile Justice: Behavioral Health	\$3,102,586	\$3,300,433	\$3,606,004	\$4,722,983
K-12 Special Education: Behavioral Health	\$15,027,302	\$16,781,366	\$23,834,284	\$29,575,220
K-12 Student Services: Behavioral Health	\$11,606,660	\$13,321,707	\$16,259,504	\$19,899,148
Medicaid: Clinics/Health Centers	\$19,351,208	\$\$20,234,180	\$20,705,059	\$9,995,363
Medicaid: Counseling & Professional Services	\$1,040,671	\$1,024,126	\$2,245,709	\$386,097
Medicaid: Prescriptions/Drugs	\$20,461,501	\$17,803,367	\$12,990,010	\$12,187,314
Mental Health Prevention	\$1,146,643	\$2,768,651	\$2,858,232	\$2,976,168
Mental Health Treatment	\$3,552,348	\$3,435,672	\$4,319,941	\$6,516,595
Psychiatric Hospitalization	\$9,730,993	\$10,000,985	\$8,807,409	\$180,240
Substance Abuse Prevention	\$233,779	\$358,818	\$719,888	\$660,062
Substance Abuse Treatment	\$1,785,098	\$1,929,629	\$1,035,808	\$111,713
Regional Behavioral Health Investments	\$90,851,294	\$94,309,751	\$100,956,722	\$90,605,657

Over the survey period, spending increased 159.6% for mental health prevention, spending on substance abuse prevention went up 182.3%, and expenditures on mental health treatment increased by 83.4%. Investments in substance abuse treatment dropped by 93.7%. Due to the format of the Medicaid data reporting, these prevention and treatment spending data do not include Medicaid behavioral health charges.

Medicaid behavioral health spending in clinics and health centers dropped by 48.3% from FY 2015 to FY 2021, while Medicaid spending on behavioral health counseling and professional services went down by 62.9% and Medicaid spending on behavioral health prescriptions/drugs fell by 40.4%.

Spending on Psychiatric Hospitalization decreased by \$9.6 million, from \$9.7 million in FY 2015 to \$180,240 in FY 2021.

Regional Behavioral Health Investments by Agency Source



- The drop in FY21 Medicaid spending is echoed in the FY21 decline in behavioral health investments passed through State Agencies, which are all passed through ODM except for spending on Regional Psychiatric Hospitals passed through MHAS.
- The shift in the behavioral health fund map to K-12 Education funding which occurred through the survey period, accelerating with federal COVID relief funding in FY 2021, accounts for the \$13.5 million increase in spending passed through school districts.
- This funding shift also partly drives the increase in spending passed through county agencies, with spending increasing by \$9.7 million in county Educational Service Centers over the survey period. Investments passed through county behavioral health agencies and Family & Children First Councils went up \$4.7 million from FY 2015 to FY 2021.

Regional Behavioral Health Investments By Funding Source



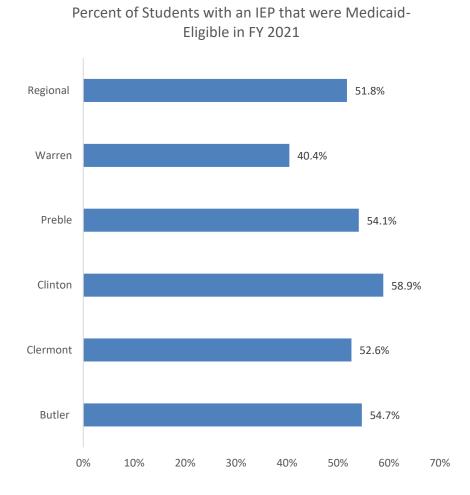
- Expenditures supported by federal and state funds were stable from FY15 to FY19 then went down in FY21, driven by the drop in Medicaid charges, which were funded with 70% federal and 30% state funds in FY21.
- K-12 Education investments are funded more through local sources in most school districts.
 K-12 Education spending on behavioral health grew by \$22.8 million from FY15 to FY21.

Medicaid Behavioral Health Charges – Residents Under Age 18

- ODM staff reported Medicaid behavioral health charges for regional children and adolescents under age 18 by county.
- Medicaid behavioral health reimbursements dropped by \$6.4 million (-12.4%) from FY15 to FY19 and then went down \$23 million (-50.5%) in FY21, for a cumulative decrease of \$29.4 million (-56.6%).
- From FY19 to FY21, Medicaid charges dropped by \$10.7 million for Clinics/Health Centers, \$8.6 million for psychiatric hospitalization, \$1.9 million for Counseling & Professional Services, \$831,835 for Substance Abuse Treatment, and \$802,695 for Prescriptions/Drugs.

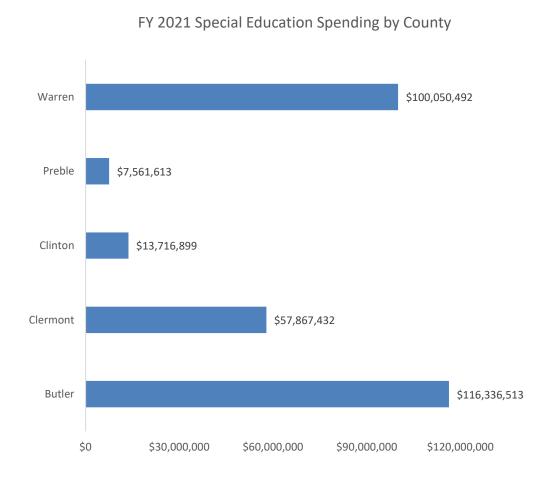


Resources for Sustained Funding: The Ohio Medicaid Schools Program & Boosted Federal Flexibility for Billing Medicaid for School-Based Services



- The <u>Ohio Schools Medicaid Program</u> enables school districts to secure Medicaid reimbursement for eligible services, specialized transportation and certain administrative activities provided to eligible children and youth.
- The eligible services are provided through an Individualized Education Plan (IEP).
- In FY 2021, more than half of <u>students</u> with an IEP were eligible for Medicaid in four of the five regional counties, with only Warren County less than half at 40.4% Medicaid-eligible IEP students.
- 51.8% of students with an IEP in the region were eligible for Medicaid in FY21.

Resources for Sustained Funding: The Ohio Medicaid Schools Program & Boosted Federal Flexibility for Billing Medicaid for School-Based Services



- In May 2023, the Biden administration announced <u>rule changes to simplify</u> <u>Medicaid billing</u> for special education services for students with an IEP.
- The new regulations make it easier to secure approval for Medicaid reimbursement and increase opportunity for flexibility for states to expand health care services delivered to Medicaid-eligible students.
- The federal government also updated a resource guide for claiming Medicaid for school-based services and outlined the new regulatory flexibilities to ease administrative burdens.
- Including expenditures for Special Education Preschool, regional FY 2021 spending on Special Education was \$295.5 million.

Resources for Sustained Funding: Upcoming HHS Grant Opportunities

- SAMHSA will award up to 23 <u>Grants for Expansion and Sustainability of the Comprehensive Community</u> <u>Mental Health Services for Children with Serious Emotional Disturbances</u> to support improved mental health outcomes for children and youth, with projected total funding of \$30 million.
- SAMHSA anticipates awarding up to 6 grants, with total available funding of \$5 million, for <u>Community</u> <u>Programs for Outreach and Intervention with Youth and Young Adults at Clinical High Risk of Psychosis</u>. The anticipated post date is February 15, 2024.
- SAMHSA forecasts awarding 59 Grants to Expand Substance Use Disorder Treatment Capacity in Adult and Family Treatment Drug Courts with total available funding of \$23.3 million. SAMHSA anticipates posting the grant opportunity on February 15, 2024.
- HHS Health Resources and Services Administration forecasts awarding 35 grants for <u>Behavioral Health</u> <u>Integration Into Community Settings</u> with total available funding of \$35 million. The grants will promote healthy emotional development and behavioral health of mothers, children and families in the community. HRSA estimates the post date of the grant as January 8, 2024.
- HHS Administration for Children and Families (ACF) projects making 68 grants for the <u>FY 2024</u> <u>Transitional Living Program</u> with total funding of \$17 million, which supports safe shelter and an array of supportive services for runaway youth agreed 16 to 22. The estimated post date is April 19, 2024. HHS-ACF also anticipates awarding 72 grants for the <u>FY 2024 Basic Center Program</u> with total funds of \$18 million, to support shelter and services for homeless youth. The estimated post date is April 22, 2024.

Public Investments in Services and Programs for Children, Youth and Families in the Southwest Ohio Counties of Butler, Clermont, Clinton, Preble and Warren

ENGAGE 2.0 REGIONAL CRADLE TO CAREER FUND MAP

Regional Cradle to Career Investments



- Regional cradle to career spending increased by \$274.6 million, or 11.8%, from FY 2015 to FY 2019.
- Driven by boosted federal spending in response to the COVID pandemic, regional cradle to career investments jumped \$296.5 million, or 11.4%, from FY 2019 to FY 2021, for a cumulative spending increase of \$571.1 million, or 24.6%.
- Between FY 2019 and FY 2021, federal funds went up \$197.4 million, or 32.5%.
- As local school districts received about 90% of federal COVID Elementary and Secondary School Emergency Relief (ESSER) funds, regional federal K-12 Education spending increased \$41.8 million, or 40.9% from FY 2019 to FY 2021.
- In March 2020, Congress authorized Supplemental Nutrition Assistance Program (SNAP) temporary emergency allotments as part of the federal fiscal response to COVID. Between FY 2019 and FY 2021, regional spending on SNAP benefits jumped \$92.4 million, or 99.6%.
- In addition, the federal government created the SNAP Pandemic Electronic Benefits Transfer (SNAP P-EBT) Program in response to COVID. FY 2021 regional SNAP P-EBT spending was \$40.9 million.
- Including SNAP P-EBT, SNAP spending increased \$133.3 million, or 143.8% from FY 2019 to FY 2021.

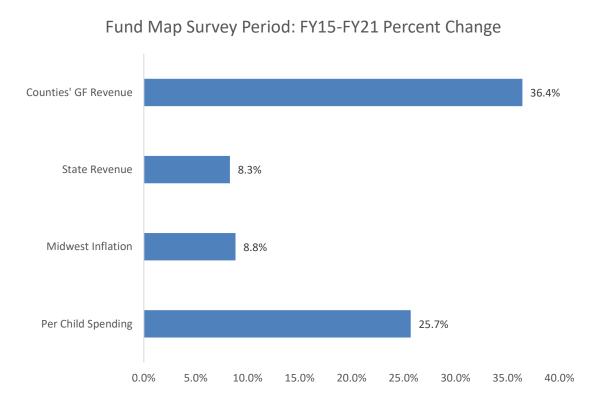
Regional Cradle to Career Spending Per Child Under Age 18

- According to Census data, children & adolescents under age 18 make up just under one-quarter of total regional population: 24.6% in FY 2015, 24.1% in FY 2017, 23.6% in FY 2019 and 23.3% in FY 2021.
- After going up \$1,451 (13.5%) from FY15 to FY19, regional cradle to career spending per child increased by \$1,304, or 10.7%, in FY21 to \$13,477.
- Over the survey period, per child spending increased by \$2,755, or 25.7%.



Regional Cradle to Career Spending Per Child

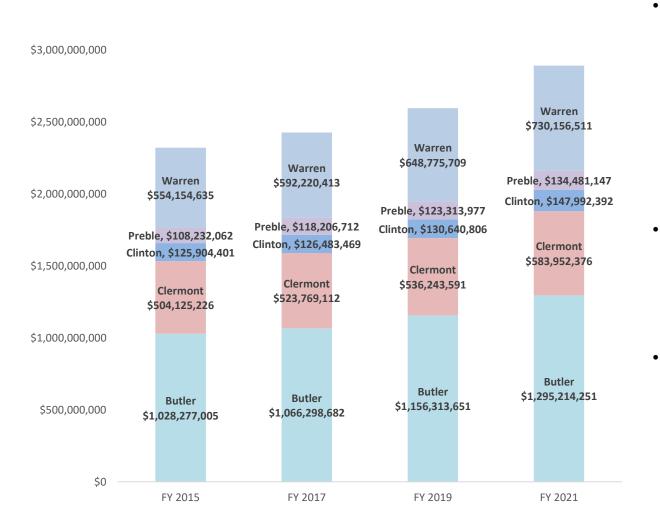
Per Child Spending Growth Exceeded Local Inflation and State Revenue Growth, but Lagged County General Fund Revenue Growth



- <u>Consumer Price Index data</u> for the Midwest region report inflation growth between FY 2015 and FY 2021 of 8.8%.
- Over the same period, <u>state</u> <u>revenues</u> grew 8.3% and <u>counties' General Fund revenues</u> grew 36.4%. COVID relief funding may have factored into the FY21 growth in County GF revenues.
- Over the fund map survey period, per child spending growth outpaced the growth in state revenue growth and inflation in the Midwest region but lagged regional counties' General Fund revenue growth.

Regional Cradle to Career Spending by County

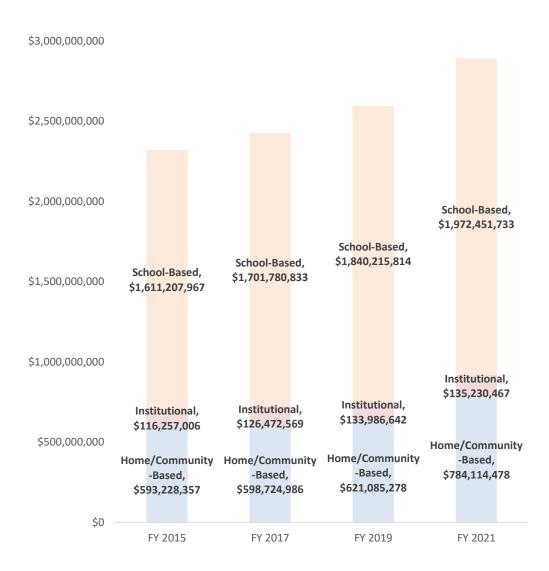
\$3,500,000,000



- In FY 2021, spending on K-12 education is about two-thirds of total cradle to career spending, so variabilities in student enrollment over time and across counties partly accounts for trends in county spending and differences in spending across counties.
- Entitlement spending on Medicaid, SNAP, WIC, OWF and child care assistance accounted for more than 20% of total cradle to career spending.
- Eligibility for these entitlements is based on household income, so variations in wealth among counties in the region account for some of the differences in spending across counties.

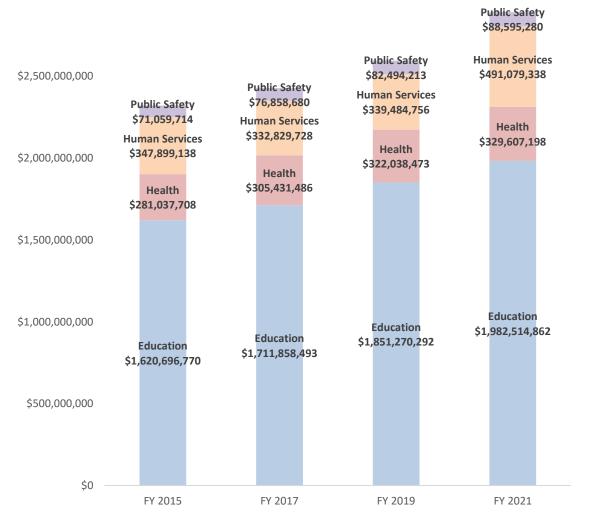
Settings of Regional Cradle to Career Investments

- Mainly due to the FY21 increase in SNAP funding, home/community based spending increased 4.7% from FY15 to FY19 and jumped 26.2% in FY21, for a cumulative increase of 32.2%.
- Institutional expenditures grew \$17.7 million (15.3%) from FY 2015 to FY 2019, with boosted spending on Medicaid Reimbursements: Facilities accounting for most of the increase. Driven by the \$8.6 million drop in Medicaid-funding, Institutional spending was up \$1.2 million, or 0.9%, in FY 2021 and increased by \$19 million, or 16.3%, over the survey period.
- Spending on school-based services steadily grew by \$361.2 million (22.4%) over the survey period, with a \$229 million (14.2%) increase from FY 2015 to FY 2019 and a \$132.2 million increase from FY 2019 to FY 2021.



Regional Cradle to Career Spending by Function Area

\$3,000,000,000



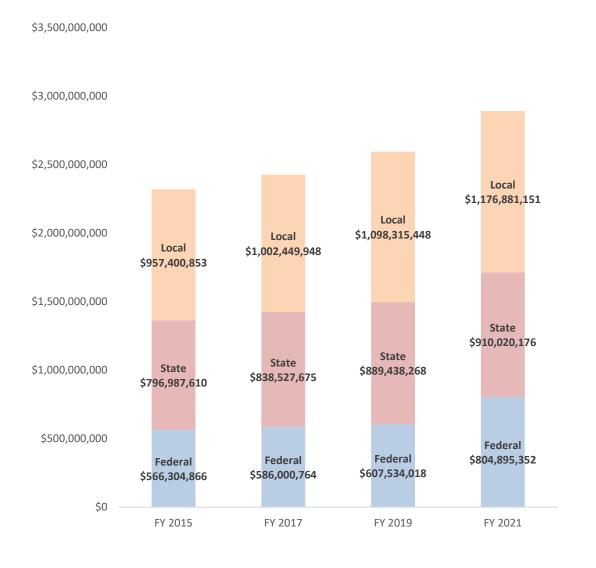
- Education spending accounted for more than two-thirds of total cradle to career investments in each fund map year, with 69.8% in FY15, 70.5% in FY17, 71.3% in FY19, and dropping to 68.6% in FY21, as the SNAP funding increase shifted a greater proportion of overall spending to Human Services.
- Education investments grew from \$1.62 billion in FY 2015 to \$1.98 billion in FY 2021, a cumulative increase of \$361.8 million, or 22.3%.
- Spending on Human Services dropped \$8.4 million (-2.4%) from FY15 to FY19, and then driven by the \$133.4 million increase in SNAP funding, jumped \$151.6 million (44.7%) in FY 2021, a cumulative increase of \$143.2 million (41.2%).
 - Spending on Health went from 12.1% of total FY 2015 investments to 12.6% in FY 2017, 12.4% in FY 2019, and 11.4% in FY 2021. Health cradle to career investments grew from \$281 million to \$329.6 million in FY 2021, a cumulative increase of \$48.6 million, or 17.3%.

Regional Cradle to Career Spending by Function Area & Function

Function Area/Function	FY 2015	FY 2017	FY 2019	FY 2021
Education	\$1,620,696,770	\$1,711,858,493	\$1,851,270,292	\$1,982,514,862
Early Education and Child Care	\$28,709,844	\$33,328,960	\$38,990,597	\$49,798,828
K-12 Education	\$1,582,555,904	\$1,668,507,349	\$1,801,289,445	\$1,922,727,267
Youth Development	\$9,431,021	\$10,022,183	\$10,990,249	\$9,988,767
Health	\$281,037,708	\$305,431,486	\$322,038,473	\$329,607,198
Behavioral Health	\$61,230,003	\$61,093,798	\$57,447,128	\$36,600,565
Developmental Disabilities	\$26,584,715	\$31,745,046	\$36,058,467	\$39,546,908
Maternal and Child Health	\$12,176,244	\$12,301,559	\$11,680,194	\$11,036,966
Physical/Somatic Health	\$181,046,746	\$200,291,083	\$216,852,684	\$242,422,760
Human Services	\$347,899,138	\$332,829,728	\$339,484,756	\$491,079,338
Child Welfare	\$46,708,953	\$45,989,190	\$48,242,738	\$49,223,178
Early Education and Child Care	\$22,168,642	\$25,233,998	\$26,908,269	\$27,493,313
Housing	\$23,174,918	\$26,464,737	\$28,084,942	\$38,967,094
Nutrition Services	\$123,699,584	\$98,898,553	\$92,751,187	\$226,352,638
Work/Family Support	\$132,147,042	\$136,243,250	\$143,497,620	\$149,043,114
Public Safety	\$71,059,714	\$76,858,680	\$82,494,213	\$88,595,280
Criminal Justice	\$42,014,545	\$45,497,782	\$48,800,598	\$52,361,878
Juvenile Justice	\$29,045,169	\$31,360,898	\$33,693,616	\$36,233,402
Regional Cradle to Career Investments	\$2,320,693,330	\$2,426,978,387	\$2,595,287,734	\$2,891,796,678

- Spending on K-12 Education was 68.2% of total spending in FY15, 68.7% in FY15, 69.4% in FY19, and 66.5% in FY21.
- Excluding Medicaid, investments in supporting working families, including Nutrition Services (SNAP), Child Care assistance, and Work/Family Support, e.g., cash assistance and energy assistance, and Housing, were 12.9% of total spending in FY 2015, dropping to 11.8% in FY 2017 and 11.1% in FY 2019, and driven by the SNAP spending increase, went up 14.8% of total spending in FY 2021.
- Medicaid charges were 10% of total cradle to career spending from FY 2015 and FY 2019 (\$228.5 million in FY15, \$245.5 million in FY17, and \$256.7 million in FY19, and then fell to 9% of total spending in FY 2021 (\$257.9 million).

Regional Cradle to Career Investments by Funding Source



- Over the fund map survey period, locally funded cradle to career spending increases by 22.9%, state funded spending goes up 14.2% and federally funded investments increase by 42.1%, driven by a FY21 surge due to the federal fiscal response to the COVID pandemic.
- Programs or services that received a large portion of federal funds included Medicaid reimbursements, K-12 Education, SNAP and Income Support programs.
- K-12 Education and Medicaid also made up a large portion of state funded services.
- Locally funded services included K-12 Education, Police/Sheriff, Public Health and Recreation & Parks.

Investments by Agency/Institution Source (Pass-Through Analysis)

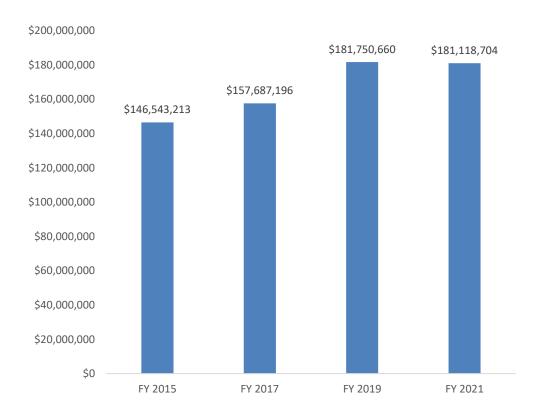
Agency Type	FY 2015	FY 2017	FY 2019	FY 2021
County	\$272,022,796	\$293,572,147	\$310,770,933	\$350,459,705
Federal	\$102,949,798	\$105,873,038	\$111,391,514	\$112,629,489
Municipality	\$34,690,878	\$37,475,280	\$41,041,381	\$43,513,119
School	\$1,508,023,707	\$1,590,942,196	\$1,723,787,035	\$1,836,197,355
State	\$403,006,150	\$399,115,726	\$408,296,871	\$548,997,010
Total Cradle to Career Investments	\$2,320,693,330	\$2,426,978,387	\$2,595,287,734	\$2,891,796,678

The agency pass-through analysis provides the agency source of cradle to career spending. County pass-through spending includes educational service centers, county agencies as well as jobs and family services spending excluding entitlement spending on SNAP, OWF and child care assistance, counted as state pass-through spending through the state Department of Jobs and Family Services (DJFS). Other state pass-through spending includes Medicaid through the Department of Medicaid (ODM). Federal pass-through spending is SSI and OASDI benefits passed through the Social Security Administration. Municipal pass-through spending includes spending in cities, townships, and villages.

ENGAGE 2.0 REGIONAL EARLY CHILDHOOD FUND MAP

Regional Investments in Early Childhood Programs and Services

Regional Early Childhood Investments



- Regional early childhood investments went up from \$146.5 million in FY 2015 to \$157.7 million in FY 2017, to \$181.7 million in FY 2019, and plateaued in FY 2021 at \$181.1 million, driven by an \$11.3 million drop in Medicaid spending on children under 5.
- The societal shifts brought about by COVID likely factored into the drop in FY21 Medicaid spending, with a \$7.6 million drop in reimbursements to facilities, e.g., hospitals, etc., and a \$2.7 million drop in spending on professional services, e.g., doctor's visits.
- Early Childhood spending accounted for 6.3% of FY 2015 regional cradle to career investments, increasing to 6.5% in FY 2017 and to 7.0% in FY 2019, and dropping to 6.3% of total spending in FY 2021.

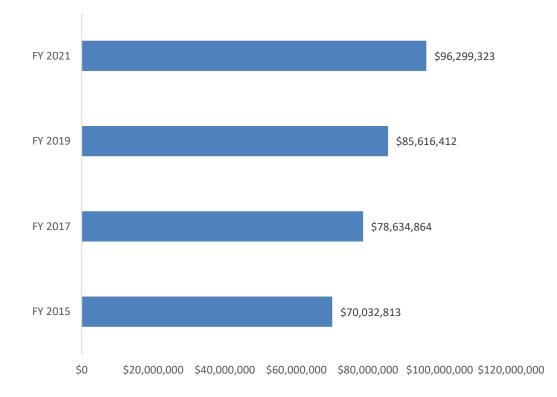
Regional Early Childhood Investments Excluding Medicaid Charges for Children Under 5

Factoring out Medicaid charges, early childhood investments grew by \$15.6 million (22.3%) from FY 2015 to FY 2019 and went up \$10.7 million (12.5%) in FY 2021 for a cumulative increase of \$26.3 million (37.5%).

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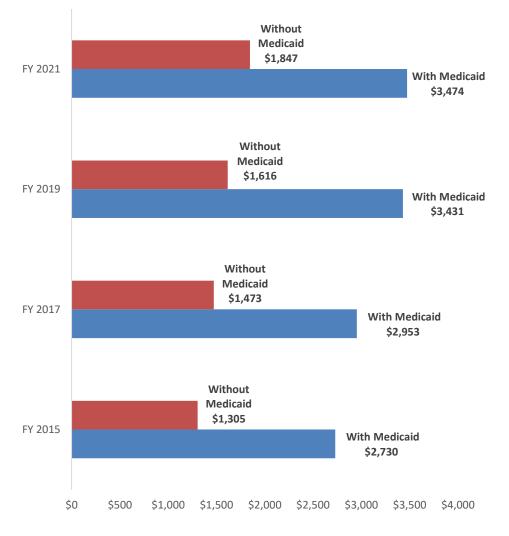
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Factoring out Medicaid charges for children under age 5, regional early childhood investments were 3% of FY 2015 cradle to career spending, going up to 3.2% in FY 2017 and 3.3% in FYs 2019 and 2021. Regional Early Childhood Investments Excluding Medicaid Charges for Children Under 5

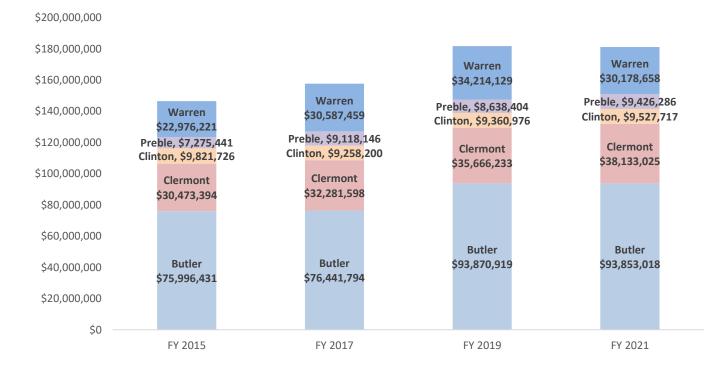


Regional Early Childhood Spending Per Child Under Age 5

- ODM staff provided regional Medicaid charges by age and Medicaid charges for children under age 5 are included in the early childhood fund map.
- The average cost per case of providing care to babies born prematurely or with other special health needs, including Neonatal Intensive Care Unit (NICU) stays and ongoing care, is extremely high.
- As shown by the FY21 drop in Medicaid, the need for these intensive, high-cost treatments can fluctuate across the fiscal years in the survey period, as well as across the counties in the region.
- Factoring out Medicaid charges can help to account for this fluctuation and to report on trends in early childhood investments, like maternal and child health and early education and child care.
- Regional early childhood spending per child under age 5 jumped \$701 (25.7%) from FY15 to FY19 and went up \$43 (1.3%) in FY21, for a cumulative increase of \$744 (27.2%).
- Factoring out Medicaid charges, per child spending increased \$311 from FY15 to FY19 (23.9%) and then grew by \$231 (14.3%) in FY21, for a cumulative increase of \$542 (41.6%) over the survey period.



Regional Early Childhood Investments by County



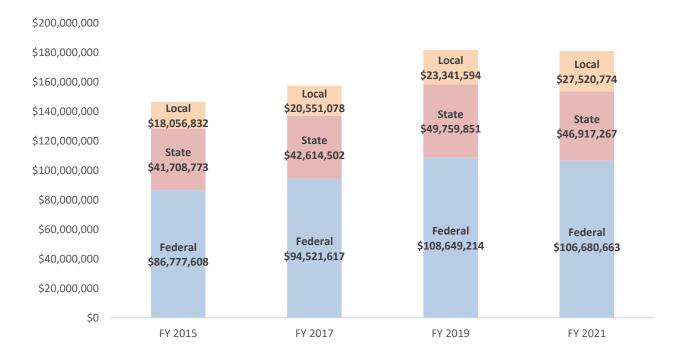
Even with the drop in FY21 Medicaid charges, income-tested entitlement expenditures for Medicaid, WIC and child care assistance were about two-thirds of total early childhood investments, so variations in relative wealth among counites in the region partly accounts for differences in spending across counties.

Regional Early Childhood Investments by Function & Subfunction

Function/Subfunction	FY 2015	FY 2017	FY 2019	FY 2021
Behavioral Health	\$112,670	\$256,257	\$308,157	\$0
Early Childhood Behavioral Health	\$112,670	\$256,257	\$308,157	\$0
Developmental Disabilities	\$6,865,413	\$7,514,089	\$7,729,196	\$7,970,216
Developmental Disabilities: Community Services (Early				
Intervention)	\$6,865,413	\$7,514,089	\$7,729,196	\$7,970,216
Early Education and Child Care	\$50,878,486	\$58,562,959	\$65,898,866	\$77,292,141
Child Care Assistance	\$22,168,642	\$25,233,998	\$26,908,269	\$27,259,855
Child Care Administrative	\$57,781	\$55,477	\$64,229	\$307,820
Early Childhood Education (Preschool)	\$1,267,159	\$1,422,586	\$1,384,946	\$3,150,687
Early Childhood Special Education	\$12,564,424	\$13,895,827	\$17,113,375	\$21,393,502
Early Head Start/Head Start	\$14,820,480	\$17,955,070	\$20,428,047	\$25,180,278
Maternal and Child Health	\$12,176,244	\$12,301,559	\$11,680,194	\$11,036,966
Early Intervention/Home Visiting	\$1,026,325	\$1,762,405	\$1,613,448	\$1,787,618
Maternal and Child Health	\$563,906	\$734,447	\$673,687	\$586,281
Nutrition Assistance	\$10,586,012	\$9,804,707	\$9,393,059	\$8,663,068
Physical/Somatic Health	\$76,510,399	\$79,052,332	\$96,134,248	\$84,819,381
Medicaid Reimbursements: Facilities	\$51,852,144	\$51,930,620	\$65,149,400	\$57,561,719
Medicaid Reimbursements: Prescriptions	\$4,950,142	\$5,696,542	\$4,414,714	\$3,442,424
Medicaid Reimbursements: Professional	\$19,708,114	\$21,425,171	\$26,570,134	\$23,815,238
Regional Early Childhood Investments	\$146,543,213	\$157,687,196	\$181,750,660	\$181,118,704

As Medicaid spending dropped from FY 2019 to FY 2021, investments in Early Education and Child Care increased \$11.4 million (17.3%), with a \$4.8 million increase in Early Head Start/Head Start spending, a \$4.3 million increase in Early Childhood Special Education expenditures, and a \$1.7 million increase in Preschool spending.

Regional Early Childhood Investments By Funding Source



- After growing from FY 2015 to FY 2019, federal and state funds dropped in FY 2021, with the decrease in early childhood Medicaid spending.
- Over the survey period, the increase in expenditures on Preschool and Early Childhood Special Education accounted for most of the increase in local funding.

Regional Early Childhood Investments by Agency Source



County pass-through spending includes spending passed through the Boards of mental health and addiction services and developmental disabilities as well as education service centers and health districts, or other local agencies providing Head Start or WIC programs.

School pass-through expenditures are investments passed through the 39 regional school districts, excluding the 3 joint vocational school districts.

State agency pass-through investments are Medicaid charges passed through ODM and child care assistance passed through DJFS.