

Department of Health and Social Services

Division of Public Health



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Joint Finance Committee Hearing **Fiscal Year 2027 Budget**

March 2, 2026

Good morning, Senator Paradee, Representative Williams, members of the Joint Finance Committee, and members of the public.

Thank you for the opportunity to speak with you today and present our accomplishments and Fiscal Year (FY) 2027 Governor's Recommended Budget (GRB).

My name is Steven Blessing, Division Director of Public Health (DPH).

The Delaware Division of Public Health is responsible for protecting and improving the health of people in Delaware across the lifespan. We focus on prevention, preparedness, and response while expanding access to care by meeting people where they are through community-based services, telehealth, and mobile health units. Our work is grounded in data, partnerships, and a commitment to serving communities across the state effectively and responsibly.

Accomplishments



Preparedness, Protection & Response

Keeping Delaware Safe.



Public Health Systems & Modernization

Modernizing public health systems to improve efficiency, transparency, and service delivery.



This slide highlights DPH's accomplishments.

Delaware strengthened preparedness, protection, and response efforts to keep residents safe during emergencies and public health events.

- Delaware became the first state to implement statewide whole blood across all ground and air Emergency Medical Services (EMS) units, expanding access to lifesaving trauma care; the Office of EMS earned State EMS Office of the Year for innovation in trauma care, overdose response, and data use.
- The Delaware Animal Abuse Offender List was established to strengthen public safety and animal protection, while the Office of Animal Welfare responded to over 30,000 calls and rescued 4,000 animals statewide.
- In 2025, DPH responded to multiple foodborne illness outbreaks, including a multistate Salmonella outbreak. DPH coordinated 3 separate responses for measles and highly pathogenic Avian influenza with exposed individuals identified, monitored, and supported in partnership with DNREC.

The Division continued modernizing public health systems to improve efficiency, transparency, and service delivery.

- DPH launched the Bureau of Grant Acquisitions and successfully secured \$157.0 Million through the Rural Health Transformation Program (RHTP) grant.
- The Public Health Laboratory expansion was completed, adding genetic sequencing, wastewater surveillance, emergency testing capacity, & state-of-the-art per- and polyfluoroalkyl substances (PFAS) drinking water testing, reducing reliance on out-of-state laboratories. and providing faster results.

Accomplishments



Community Health & Access

Improving access to preventive, primary, and community-based health services for Delawareans across the lifespan.



Federal Funding Stewardship & Stability

Protecting public health services during federal uncertainty.



DPH expanded access to community-based services statewide through the following activities:

- Expanded access through mobile health units, clinics, school sports physicals, and partnerships with shelters and unhoused communities. Delivered kindergarten oral health screenings to 8,000 students and served 1,000 children and families through the Delaware Smile Check Program with fluoride varnish, oral health screenings, and case management, and grew the Screening for Life Program to 4,207 enrollees as of November 30, 2025.
- The Lead Screening Pilot, developed in response to a recommendation from the Childhood Lead Poisoning Prevention Advisory Committee (CLPPAC), aimed to expand blood lead testing for children from birth to six in high-risk Delaware communities.
- Lead-Based Paint Program conducted 48 Lead Risk Assessments (LRAs) to identify lead hazards in pre-1978 homes associated with child poisoning cases.

Federal Funding Stewardship & Stability

- During federal funding uncertainty, the Division proactively protected essential public health services through a comprehensive review of federal funding, expenditures, and timelines.
- Allowable funds were strategically realigned, and vacancies were carefully managed to minimize service disruption, avoid layoffs, and support workforce stability, fiscal responsibility, and long-term sustainability.

FY 2027 Governor's Recommended Budget

(\$ in Thousands)

| | GF | ASF | NSF | Total |
|--------------|----------|----------|----------|-----------|
| FTEs | 330.8 | 58.5 | 300.9 | 690.2 |
| Dollars (\$) | 61,481.3 | 39,749.3 | 68,466.1 | 169,696.7 |



Budget Definitions:

GF – General Funds
ASF – Appropriated Special Funds
NSF – Non-Appropriated Special Funds
FTEs – Full Time Equivalent Positions

The slide above shows the total budget included in the FY2027 Governor's Recommended Budget (GRB).

Our Division's FY 2027 Recommended Budget is:

- \$61.0 Sixty-One Million dollars in General Funds (GF)
- \$39.0 Thirty-Nine Million dollars in Appropriated Special Fund Spending Authority (ASF); and
- \$68.0 Sixty-Eight Million dollars in Non-Appropriated Special Funds (NSF).
- For a Total Recommended Budget of \$169.0, One Hundred Sixty-Nine Million dollars.

Looking Ahead



Federal
Funding
Reductions



Federal Grants
Instability

- Breast and Cervical Cancer Early Detection Program- \$250,000
- Ryan White Part B Supplemental Grant- \$615,000
- Ryan White Care Act Title II Part B Grant- \$61,000
- The Implementation of Safe Drinking Water Act grant- \$377,000
- Tuberculosis (TB) Elimination and Laboratory Cooperative Agreement grant-\$100,000

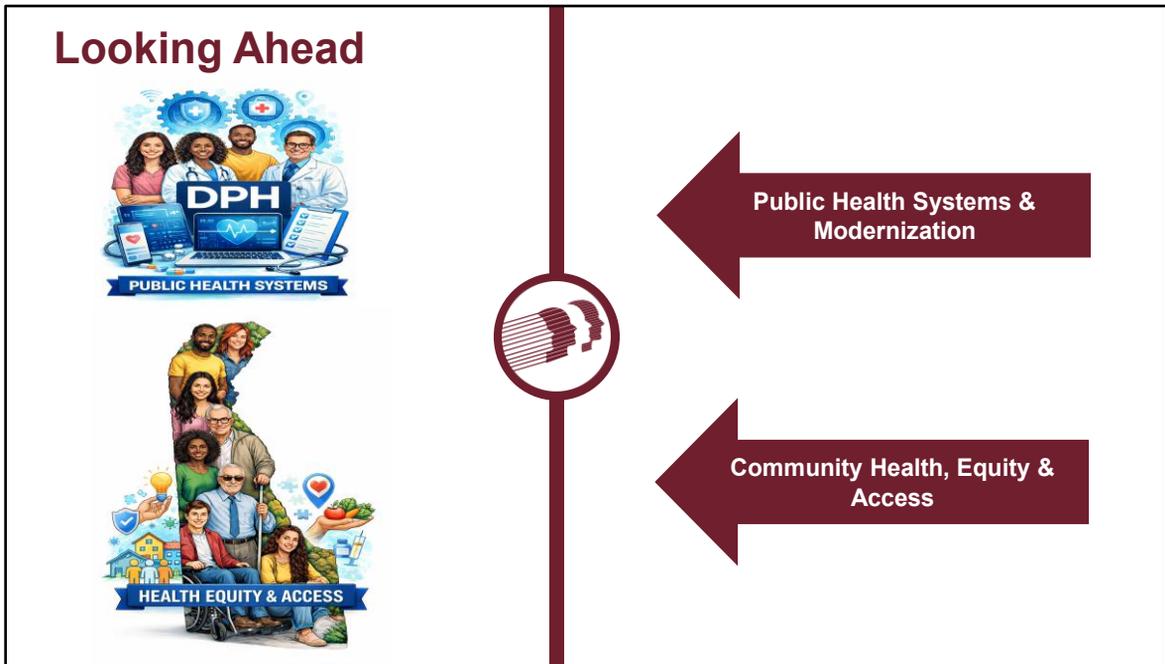
Looking ahead, federal funding uncertainty is an area of concern. We have experienced a reduction of \$1.4 million across a variety of programs to prevent, detect, and treat breast cancer, HIV, TB, and drinking water contamination.

- Additionally, federal policy changes to the service population are expected to increase Medicaid disenrollment and shift medical and support service costs to DPH programs such as Screening for Life and Delaware's Ryan White HIV/AIDS program.

Grant Instability exists regarding our current and future federal funding, even when no formal reduction has occurred, for example;

- Programs are receiving Notice of Awards (NOAs) late or are not receiving NOAs for several months after the end of the last funding cycle.
- While funding has ultimately been restored in most cases, initial reductions or late NOAs are producing staff instability.

Ultimately, these changes create a situation where we must stretch existing federal dollars further. We have made the difficult decision to reduce certain non-core support services for people living with HIV in the face of funding pressure, including dental assistance. Also, there may be reduced capacity for TB screening and testing activities. Across most DPH programs, we are prepared for reduced treatment support capacity, increased strain on staffing, and limited service capacity if reductions occur.



At the same time, there are areas where we are growing and improving programs.

Evolving Public Health Systems & Modernization are multi-year efforts.

- DPH serves as the lead agency for the RHTP grant, administering and coordinating programmatic, fiscal, and reporting functions, and has issued six Requests for Proposal (RFPs) to implement funded initiatives.
- Looking ahead, the Division will continue strengthening efficiency, consistency, and accountability across programs, having already reviewed 37 of 44 regulations and updated division policies. DPH will expand data access & grant readiness through improved infrastructure and implementation of a project management system to streamline reporting and document review.

We will continue to focus on Community Health, Equity & Access for all.

- The DPH Bureau of Health Equity partners with programs and sections across the Division to ensure that projects and initiatives are designed and reviewed with health equity in mind, so services reach people where they are.
- The Division will release *Our Health, Our Future*, a health equity resource report that links life stages, health outcomes, and opportunities for individual and community action across Delaware.
- The Lead Program, using awarded funding from the Department of Housing and Urban Development Capacity Building grant, will establish an outreach coalition and develop lead abatement curricula in collaboration with Delaware Technical and Community College.
- These combined efforts position DPH to align data, policy, and services more closely with the needs of Delaware’s communities and take our services to people where they are.

THANK YOU



We appreciate the continued partnership in these uncertain times and are happy to answer any questions.