



Administration and Support

APPROVED FY27 BUDGET

\$68,728,327

FULL TIME EQUIVALENTS

186.90

☀ JAMES BRIDGERS PH.D., MBA, DIRECTOR

FUNCTION

The function of Administration and Support Services is to provide overall leadership, administration, and direction to the Department of Health and Human Services (DHHS), while providing an efficient system of support services to ensure effective management and delivery of services.

PROGRAM CONTACTS

Contact Mark Hodge of the HHS - Administration and Support at 240-777-1568 or Deborah Lambert of the Office of Management and Budget at 240-777-2794 for more information regarding this department's operating budget.

PROGRAM DESCRIPTIONS

☀ Admin - Office of the Chief Operating Officer

This office oversees the administrative services that support direct service delivery and the day-to-day operations of the department including: budget development and expenditure analysis; management of the department's fiscal operations including payments, medical billing, Federal claiming, and State financial reporting; contract management; logistics and facilities support; information technology support and development; grant acquisition; all human resource and labor management functions; emergency mass care and Continuity of Operations Planning (COOP); data analysis, reporting, and customer service monitoring; and oversight of compliance activities such as internal audits and coordination of external audits. The office also oversees the implementation of department-wide policies and procedures for administrative functions and coordinates and facilitates service delivery practices to promote consistency across programs and to further the goal of integrated practice across the department.

FY27 Approved Changes	Expenditures	FTEs
FY26 Approved	39,496,198	105.50
Technical Adj: Convert Contractual Information Technology Positions into Merit Positions	0	3.00
Multi-program adjustments, including negotiated compensation changes, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting multiple programs.	8,211,873	33.50
FY27 Approved	47,708,071	142.00

Admin - Office of the Director

The office of the Director provides leadership and strategic direction for the Montgomery County Department of Health and Human Services (DHHS), oversees policy development, service integration, customer service, and partnerships. The office also guides health and social services initiatives, manages external relationships, and ensures compliance with applicable laws, including the Americans with Disabilities Act of 1990 (ADA) and the Health Insurance Portability and Accountability Act (HIPAA).

Building on this foundation, DHHS has, since 2008, embedded equity as a core value through its "Culture of Equity" framework, which strengthens informed decision-making and supports equitable policy and resource allocation across all areas of the department. The Director advances a unified strategic agenda that includes service integration, equity, technology modernization, workforce development, and strong partnerships, while ensuring meaningful access to services for all residents regardless of language or communication barriers.

Program Performance Measures	Actual FY24	Actual FY25	Estimated FY26	Target FY27	Target FY28
Percent of clients able to access services upon referral ¹	93%	94%	90%	90%	90%
Total number of interpretations provided over the phone by the phone interpretation vendor to DHHS staff in order to serve clients with limited English proficiency ²	30,835	32,975	34,650	36,382	38,202
Percent of participants of Equity Workshop who will be able to apply behaviors learned ³	98%	98%	98%	98%	98%

¹ Two contractors provide services in this program, CASA and Cross Cultural Infotech. Among CASA clients, 90% accessed services upon referral. Among Cross Cultural Infotech clients, 98% access services upon referrals.

² With efforts to increase staff use of the interpretation line, the program is seeing increased demand and expects the trend to continue in coming years. Projections reflect 5% annual increase.

³ In FY25, 113 Department of Health and Human Services staff participated in a workshop. Of these participants, 111 completed the follow up survey.

FY27 Approved Changes	Expenditures	FTEs
FY26 Approved	16,917,091	29.50
Technical Adj: Correction Associated with Prior Contract Transfers to the Office of Food Systems Resilience	(65,107)	0.00
Multi-program adjustments, including negotiated compensation changes, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting multiple programs.	(14,611,540)	(17.10)
FY27 Approved	2,240,444	12.40

Minority Programs

The three minority health programs (MHIPs) comprise the following: the African American Health Program (AAHP), the Latino Health Initiative (LHI), and the Asian American Health Initiative (AAHI). The MHIPs support department-wide efforts to eliminate disparities and increase access to population-targeted programs and services. The knowledge, expertise, and experiences across the MHIPs in racial, ethnically, and linguistically diverse communities inform department-wide programs, policy, and budget decisions.

Program Performance Measures	Actual FY24	Actual FY25	Estimated FY26	Target FY27	Target FY28
African American Health Program: Number of individuals encountered at events and programs ¹	33,826	83,742	84,000	80,000	80,000
African American Health Program: Percent of clients who improved A1C blood sugar level test at 3-month follow up (diabetes management/prevention) ²	85%	85%	75%	75%	75%

Program Performance Measures	Actual FY24	Actual FY25	Estimated FY26	Target FY27	Target FY28
Number of individuals served by the Asian American Health Initiative ³	195,676	126,723	120,386	114,366	108,648
Percent of clients satisfied with services provided by the Asian American Health Initiative ⁴	98%	99%	95%	95%	95%
Asian American Health Initiative: Average percent of Asian American Health Initiative participants who improved on one of four program outcomes (Increased knowledge; increased confidence; behavioral intent or change; enhanced access) ⁵	91%	98%	90%	90%	90%
Number of individuals served by the Latino Health Initiative ⁶	73,075	69,037	70,000	70,000	70,000
Percent of clients satisfied with services provided by the Latino Health Initiative ⁷	96%	98%	96%	96%	96%
Latino Health Initiative: Average percent increase in wages from time participants entered program until hired as health professionals ⁸	167%	162%	160%	160%	160%

¹ The number of individuals may be duplicative across events and programs run by the African American Health Program (AAHP). In FY25, data collection expanded beyond classes and programs to include mass events, media appearances, and family units. As such, FY25 may not be comparable to prior years' reporting. The program projects a slight decrease in FY27 due to changes to programming and service delivery.

² Projections of 75% reflect target outcome agreed upon in contract.

³ The number of individuals served represents the total duplicated (non-unique) services delivered across all Asian American Health Initiative (AAHI) programs and contracts. These include Healthy Communities Fund awardees (107,775), contractors (11,815), and AAHI programs and workshops (7,133). The decrease from FY24 reflects more stringent reporting requirements for contractors and grantees around unduplicated and duplicated clients. It also reflects inflation and the rising cost of service delivery without an incremental increase in the grant funding pool which leads to projected decreases in FY26-FY28 as well.

⁴ Asian American Health Initiative contractors collect satisfaction levels across all programs.

⁵ All Asian American Health Initiative (AAHI) and AAHI funded programs assess outcomes based on increased confidence, increased knowledge, behavior intent or change, and enhanced access. Each program captures one or more of these outcomes based on its specific goals and relevance. On average, 98% of clients achieved at least one of these outcomes. As data collection methods become more robust across contractors and grantees, and inflation continues to impact service delivery, the program projects a potential decline over time.

⁶ In FY25, the Latino Health Initiative (LHI) saw a very small decrease compared to previous years, mainly due to a short period of transition of the contractual mechanism in which LHI conducts outreach interventions by Community Health Workers. In line with this, LHI increased the number of clients served in the climate and health program, the new substance use prevention program, and the golden years program serving elders. Over 46,998 individuals were served through 849 outreach activities and events.

⁷ In FY25, the Latino Health Initiative improved its survey methodology to ensure it is sampling across all of its programs. Assessment of clients satisfied is based on 5,532 survey responses.

⁸ Average increase in wages was calculated using the wage of the four Registered Nurses (RN) who secured employment during FY25.

FY27 Approved Changes	Expenditures	FTEs
FY26 Approved	17,925,610	27.00
Technical Adj: Convert Contractual Community Health Workers to Merit Staff in the Asian American Health Initiative	0	2.50
Technical Adj: Staff for Administration of the Healthy Communities Fund Grant in Asian American Health Initiative	0	1.00
Reduce: Tutoring Services for Youth and Senior Wellness Services for Seniors in the Vietnamese Community and Transition Non-Competitive Contract to Healthy Communities Fund Grant Program	(92,638)	0.00
Decrease Cost: Information Line Contract in the Latino Health Initiative Due to Decreased Usage	(151,610)	0.00
Decrease Cost: Case Management Services in the Latino Health Initiative by 50 Percent of Contract Value Due to Transition of Clients to Lighthouse Initiative	(537,562)	0.00
Multi-program adjustments, including negotiated compensation changes, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting multiple programs.	1,636,012	2.00
FY27 Approved	18,779,812	32.50

REALIGNED PROGRAMS

Funding in the following programs has been realigned to other programs within this department or to other departments.

Admin - Office of Community Affairs

FY27 Approved Changes	Expenditures	FTEs
FY26 Approved	637,759	4.00
Multi-program adjustments, including negotiated compensation changes, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting multiple programs.	(637,759)	(4.00)
FY27 Approved	0	0.00

Community Action Agency

FY27 Approved Changes	Expenditures	FTEs
FY26 Approved	5,086,845	18.00
Multi-program adjustments, including negotiated compensation changes, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting multiple programs.	(5,086,845)	(18.00)
FY27 Approved	0	0.00

Equity and Language Access

FY27 Approved Changes	Expenditures	FTEs
FY26 Approved	6,115,469	7.00
Multi-program adjustments, including negotiated compensation changes, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting multiple programs.	(6,115,469)	(7.00)
FY27 Approved	0	0.00

Head Start

FY27 Approved Changes	Expenditures	FTEs
FY26 Approved	4,666,926	2.00
Multi-program adjustments, including negotiated compensation changes, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting multiple programs.	(4,666,926)	(2.00)
FY27 Approved	0	0.00

PROGRAM SUMMARY

Program Name	FY26 APPR Expenditures	FY26 APPR FTEs	FY27 APPR Expenditures	FY27 APPR FTEs
Admin - Office of Community Affairs	637,759	4.00	0	0.00
Admin - Office of the Chief Operating Officer	39,496,198	105.50	47,708,071	142.00
Admin - Office of the Director	16,917,091	29.50	2,240,444	12.40
Community Action Agency	5,086,845	18.00	0	0.00
Equity and Language Access	6,115,469	7.00	0	0.00
Head Start	4,666,926	2.00	0	0.00
Minority Programs	17,925,610	27.00	18,779,812	32.50
Total	90,845,898	193.00	68,728,327	186.90