California Department of Aging (CDA)

Disease Prevention and Health Promotion Services Program (Title IIID) Program Statistical Fact Sheet

TOTAL PROGRAM EXPENDITURES (000s)

TOTAL PROGRAM	FISCAL YR 16/17 ¹	FISCAL YR 17/18 ²	FISCAL YR 18/19 ³	FISCAL YR 19/20 ⁴ ESTIMATED
Local Assistance	\$1,957	\$1,927	\$2,689	\$3,066
State Operations	\$0	\$0	\$0	\$0
Total Program Expenditures	\$1,957	\$1,927	\$2,689	\$3,066
General Fund	\$0	\$0	\$0	\$0
Federal Fund (Title IIID)	\$1,957	\$1,927	\$2,689	\$3,066
Total Funds	\$1,957	\$1,927	\$2,689	\$3,066

TOTAL LOCAL ASSISTANCE EXPENDITURES (000s)

TOTAL LOCAL ASSISTANCE	FISCAL YR 16/17	FISCAL YR 17/18	FISCAL YR 18/19	FISCAL YR 19/20 ESTIMATED
General Fund	\$0	\$0	\$0	\$0
Federal Fund	\$1,957	\$1,927	\$2,689	\$3,066
Program Income	\$15	\$22	\$12	\$0
Local Non-Match	\$327	\$364	\$290	\$0
Local Match	\$882	\$1,244	\$817	\$0
Total Funds	\$3,181	\$3,557	\$3,808	\$3,066

PERFORMANCE DATA

PERFORMANCE DATA 5	FISCAL YR 16/17	FISCAL YR 17/18	FISCAL YR 18/19	FISCAL YR 19/20 ⁶ ESTIMATED
# of Health Promotion Contacts ⁷	29,546	84,782	59,248	

¹ Local Assistance, Program Income, Local Non-Match, and Local Match expenditures are based on the FY 2016/17 AAA financial closeout reports.

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² Local Assistance, Program Income, Local Non-Match, and Local Match expenditures are based on the FY 2017/18 AAA financial closeout reports.

³ Local Assistance, Program Income, Local Non-Match, and Local Match expenditures are based on the FY 2018/19 AAA financial closeout reports.

⁴ Local Assistance expenditures for FY 2019/20 are estimated based on the FY 2020/21 DF-301 Supplementary Schedule for Federal Funds.

⁵ Performance Data is obtained from the annual National Aging Program Information Systems (NAPIS) State Program Reports.

⁶ FY 2019/20 performance estimates are intentionally left blank.

⁷ FY 2016/17 Health Promotion Contacts decreased due to challenges by AAAs to provide evidence-based programs, more stringent regulations, and decreased contracted service providers. FY 2017/18 Health Promotion Contacts increased due to AAAs expanding training and outreach, increasing the number of available programs, and establishing additional partnerships to increase capacity. FY 2018-19 Health Promotion Contacts decreased due to fluctuations in the availability of master-trained staff to provide highest-tier evidence-based programs.